



COUNTY BOROUGH OF ROTHERHAM

REPORT

BY THE

MEDICAL OFFICER OF HEALTH

WILLIAM BARR, M.D., D.Sc., D.P.H.

FOR THE YEAR

1932

ROTHERHAM:

HENRY GARNETT & CO., LTD., "ADVERTISER" OFFICE

1933



COUNTY BOROUGH OF ROTHERHAM

REPORT

BY THE

MEDICAL OFFICER OF HEALTH

WILLIAM BARR, M.D., D.Sc., D.P.H.

FOR THE YEAR

1932


ROTHERHAM :

HENRY GARNETT & CO., LTD., "ADVERTISER" OFFICE

1933

Table of Contents.

								PAGE.
Section I.	Natural and Social Conditions of the Area	...	...	...	...	...	...	9
II.	General Provision of Health Services in the Area	...	...	...	...	...	...	16
III.	Sanitary Circumstances of the Area	...	...	...	...	...	...	25
IV.	Housing	...	...	...	...	...	...	38
V.	Inspection and Supervision of Food	...	...	...	...	...	...	40
VI.	Infectious Diseases generally	...	...	...	...	...	...	50
VII.	Tuberculosis	...	...	...	...	...	...	64
VIII.	Venereal Diseases	...	...	...	...	...	...	76
IX.	Maternity and Child Welfare	...	...	...	...	...	...	82
X.	Mental Deficiency	...	...	...	...	...	...	106
XI.	Blind Persons	...	...	...	...	...	...	109



Digitized by the Internet Archive
in 2018 with funding from
Wellcome Library

<https://archive.org/details/b30042641>

COUNTY BOROUGH OF ROTHERHAM

HEALTH COMMITTEE

as at December 31st, 1932.

HIS WORSHIP THE MAYOR
(COUNCILLOR J. KETTON)

Chairman :

ALDERMAN F. HARPER.

Vice-Chairman :

COUNCILLOR G. C. BALL.

ALDERMAN	F. A. BARLOW.	COUNCILLOR	MRS. F. L. GREEN.
„	W. BROOKE, J.P.	„	H. GUEST.
COUNCILLOR	C. R. ADAMS.	„	H. D. HUNTER.
„	G. A. BARKER.	„	W. MANN.
„	R. DEWAR.	„	H. NORTH.
„	W. FOWLER.	„	E. QUIBELL.

SUB-COMMITTEES:

HOSPITALS SUB-COMMITTEE.

MATERNITY AND CHILD WELFARE SUB-COMMITTEE.

MENTAL DEFICIENCY SUB-COMMITTEE.

JOINT COMMITTEES:

SHEFFIELD, ROTHERHAM, AND DISTRICT, SMOKE ABATEMENT
COMMITTEE.

SOUTH WEST YORKSHIRE JOINT BOARD FOR THE MENTALLY
DEFICIENT.

HEALTH OFFICERS OF THE LOCAL AUTHORITY.

These are as under :—

PUBLIC HEALTH DEPARTMENT (under Public Health Committee).

WILLIAM BARR, M.D., D.Sc., D.P.H.

LANCELOT H. COPPING, M.B., Ch.B.

ALEXANDER T. DOIG, M.B., Ch.B., D.P.H.

THOMAS M. HAUGHIE, M.B., Ch.B., D.P.H.

MARY D. A. BOYD, M.B., Ch.B.

JOHN CHISHOLM, F.R.C.S., Ed., M.B., Ch.B.

G. GREEN, M.R.C.V.S.

J. EVANS, F.I.C., F.C.S.

MR. J. E. FULLER (1), (2), (6), (8), (9).

MR. W. PEARCE (1), (2), (8), (9).

MR. T. W. PEARCE (1), (2), (8), (9).

MR. W. HORTON (1), (2).

MR. G. C. HARRISON (1).

MR. L. F. LIGHTFOOT (1)

MR. J. H. HOARE (3).

MR. G. E. WESTBY (1), (8).

MISS J. BARRACLOUGH (1), (10).

MISS E. G. CRESSWELL (10), (11), (13).

MISS M. M. RIGBY (1), (10).

MISS M. F. SENIOR (10), (11), (14).

MISS E. HEYES (10).

MISS E. M. SLANEY (10), (11). (to 13.6.32)

MRS. M. HEDLEY (4), (10), (11) (from 13.6.32)

MISS A. E. SCRUTON (11), (12).

MISS C. BARRACLOUGH (10), (11), (13), (15).

MISS A. SMEETON (11), (12).

MRS. EYRE.

MISS A. E. BUFFHAM (10), (11).

MR. R. LEEMAN.

MR. F. JESSOP.

MRS. F. A. MONKS (11) (from 23.9.32)

Detective Inspector F. SHORE.

MISS N. BROOKES.

Public Health Department.

Maternity and Child Welfare Section.

Medical Officer of Health.

Assistant Medical Officer of Health, Venereal Diseases Medical Officer, and Maternity and Child Welfare Medical Officer.

Assistant Medical Officer of Health, Tuberculosis Officer, Sanatorium Medical Officer, and Medical Officer, Infectious Diseases Hospital.

Assistant Medical Officer, Oakwood Hall Sanatorium.

Assistant Medical Officer, Maternity and Child Welfare (part time).

Obstetric Consultant (part-time).

Veterinary Inspector (part time).

Public Analyst (by fees.)

Senior Sanitary Inspector.

Assistant Senior Sanitary Inspector and Inspector of Food and Drugs.

Sanitary Inspector and Inspector of Meat.

District Sanitary Inspector.

District Sanitary Inspector.

District Sanitary Inspector.

Smoke Inspector (by arrangement with the Sheffield, Rotherham, and District, Smoke Abatement Committee).

Chief Clerk.

Senior Health Visitor.

Assistant Senior Health Visitor.

Health Visitor and Inspector of Midwives.

Health Visitor and Nurse, Venereal Clinic.

Health Visitor and Mental Deficiency Visitor.

Health Visitor.

Health Visitor

Nurse, Tuberculosis Dispensary.

Matron, Isolation Hospital.

Matron, Oakwood Hall Sanatorium.

Certificated Teacher, Oakwood Hall Sanatorium.

Matron, Ferham House Maternity Home.

Disinfectors.

Venereal Diseases Orderly.

Venereal Diseases Nurse (part time)

Inspector of Common Lodging Houses (part time)

Visitor of Blind Persons.

Four Clerks.

Two Clerks.

Qualifications.

- (1) Certificate, Royal Sanitary Institute (Sanitary Inspector).
- (2) Do. do. (Meat and other Foods).
- (3) Do. do. (Smoke Inspector).
- (4) Do. do. (Health Visitor).
- (5) Health Visitors Exam. under Ministry of Health Regulations.
- (6) Certificate, San. Insp. Assoc. Exam. Bd. (Sanitary Inspector).
- (7) Diploma, Board of Education, Health Visitors.
- (8) Certificate, Board of Education, Building Construction.
- (9) Certificate, City and Guilds Institute, Plumbing.
- (10) Certificate, Central Midwives Board.
- (11) General Trained Nurse.
- (12) Certificate, Tuberculosis Association.
- (13) Fever Trained Nurse.
- (14) Certificate, Gynæcological Training.
- (15) Housekeeping and Laundry Diploma.

PUBLIC VACCINATION.

T. V. GRIFFITH, M.B., Ch.B., B.A.O.	Public Vaccinator, Alma Road Hospital.
C. B. THOMSON, M.B., Ch.B.	Public Vaccinator, North-West Rotherham.
H. R. ELLIOTT, M.R.C.S., L.R.C.P.	Public Vaccinator, South-East Rotherham.
MR. T. J. VOSS.	Vaccination Officer, North-West Rotherham.
MR. F. S. BUTCHER.	Vaccination Officer, South-East Rotherham.

SCHOOL MEDICAL DEPARTMENT (under Education Authority).

A. C. TURNER, M.D., D.P.H.	School Medical Officer.
ELSA PAIGE, M.B., Ch.B.	Assistant School Medical Officer (part-time).
M. RACHAEL POWELL, M.B., Ch.B.	Assistant School Medical Officer (part-time).
H. CECIL SNELL, M.A., M.B., B.Ch., M.R.C.S., L.R.C.P.	Ophthalmic Surgeon (part-time).
H. L. CROCKETT, M.B., Ch.B.	Orthopaedic Surgeon (part-time).
H. R. HEALD, L.D.S., R.C.S.Eng.	Dental Surgeon.
MISS H. WHEATCROFT.	School Nurse.
MISS C. CROFTON.	School Nurse.
MISS G. CAVE.	School Nurse.
MISS K. RAY	School Nurse.
MISS N. SELLORS (to October, 1932).	School Nurse.
MISS G. M. BEEDEN (from November, 1932)	School Nurse.
MISS A. C. HAMPTON.	Orthopaedic Nurse and Masseuse.
School Medical Department.	Five Clerks.

PUBLIC ASSISTANCE MEDICAL DEPARTMENT (under Public Assistance Committee).

T. V. GRIFFITH, M.B., Ch.B., B.A.O.	Superintendent Medical Officer, Alma Road Hospital.
P. A. MOORE, M.B., Ch.B.	Assistant Medical Officer, Alma Road Hospital.
C. B. THOMSON, M.B., Ch.B.	District Medical Officer, North-West Rotherham.
W. CRERAR, M.B., Ch.B.	District Medical Officer, South-East Rotherham.
H. M. MILLS, M.B., Ch.B.	District Medical Officer, Thorpe and Scholes.
MISS E. C. DAVIES.	Superintendent Nurse, Alma Road Hospital.

Public Health Department,

Town Hall,

Rotherham.

To the Chairman—Alderman F. Harper—and Members
of the Public Health Committee.

I herewith submit my annual report on the
public health circumstances of the County Borough of
Rotherham for the year 1932.

WILLIAM BARR,

Medical Officer of Health.

SECTION I.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

GENERAL STATISTICS.

Area (in acres)	5,893
Population (census), 1931	69,691
Population (estimated), 1932	69,820
Number of inhabited houses, 1932	16,988
Rateable value	£324,984
Sum represented by a penny rate	£1,270

THE CENSUS, 1931

A survey of the statistics of the 1931 Census, published in the County Volume by the Registrar-General during the past year, shows that on the night of the Census there were 69,691 persons in Rotherham, which is equal to 11.8 persons per acre. Statistically, of course, one recognises that this figure in itself gives no material indication of the concentration of the population. This is well borne out in studying the figures for the various wards of the Borough. In Kimberworth, with its large tract of unbuilt on land, the persons per acre were 2.9, whereas the opposite was found in St. Ann's, with the large number of 68.2.

The figures for the other wards were, Clifton 15.4, East 24.0, Masborough 19.4, North 24.8, South 11.8, Thornhill 37.3, and West 10.4.

More important, however, than this acre concentration is the distribution of persons per room. After all, overcrowding is a question of elbow room, and room distribution is a fair index. In the County Borough as a whole there was less than one person per room, the actual figure being 0.91, which shows that as a Borough there was no question of gross overcrowding. One has to remember, however, that an average has extremes on either side and that there will be found islands of concentration in the general sea.

This is evidenced in the figures for the wards giving the persons per room as follows :—

Clifton	0.80	East	0.85	Kimberworth	0.92
Masborough	1.03	North	0.94	St. Ann's	0.93
South	0.74	Thornhill	1.05	West	0.98

With regard to the sex division of the population Rotherham was quite unique in that there were more males than females, the numbers being 35,126 and 34,565 or a proportion of 984 females to every 1,000 males. The average age of males is given as 30.5 and of females 30.3, whilst under the age of 21 years there were 38.2 per cent of the population made up of 13,365 males and 13,265 females.

It is interesting to note that on the night of the census there was one woman in the group of 95 years and over, and 13 persons, 5 male and 8 female, in the 90 to 94 year old group.

Assuming that the marriageable age is somewhere between 20 and 34 there were in the town 4,167 single males and 3,117 single females. It would appear that the "most marrying" time for men is 25 and over, and for women between 20 and 24. Widowed women exceeded widowed men, the numbers being 2,432 and 1,414.

The average size of the family was 3.96 persons as compared with 4.53 in 1921, a reduction per family of 0.57.

VITAL STATISTICS.

In the following summary extracts from the vital statistics for the year are given :—

	Total.	Male.	Female.		
Live births—					
Legitimate ...	1211	626	585	} Birth rate per 1,000 of the estimated resident population	18.11
Illegitimate	54	27	27		
Stillbirths ...	63	38	25	Rate per 1,000 total (live and still) births	49.5
Deaths ...	776	406	370	Death rate per 1,000 of the estimated resident population	11.15
Deaths from puerperal causes—				Deaths.	Rate per 1,000 total (live and still) births.
Puerperal sepsis ...	...	...	...	5	4.52
Other puerperal causes		...	...	1	0.75
				—	—
Total ...	...	...	...	6	5.27
				==	==
Death rate of infants under one year of age					
All infants per 1,000 live births ...	...	...	...	...	70
Legitimate infants per 1,000 legitimate live births				...	70
Illegitimate infants per 1,000 illegitimate live births				...	74
Deaths from measles (all ages) ...	...	...	...	...	24
Deaths from whooping cough (all ages) ...	...	...	...	...	6
Deaths from diarrhoea (under 2 years of age) ...	...	...	...	...	4

In the tables which follow are given the detailed vital statistics of the County Borough.

Other tables of a more specific nature are incorporated in the later sections of this report dealing with infectious diseases generally, tuberculosis, venereal diseases, maternity and child welfare, mental deficiency, and blind persons.

In the following table the causes of death at different periods of life, as supplied by the Registrar General, are given for the year 1932. The inclusion of this is considered desirable by the Ministry of Health for the purpose of comparison with the figures for other areas, and relates to deaths **registered** in the calendar year, which totalled 776.

The remainder of the figures relating to deaths in other tables of this report are those of the actual deaths which **occurred** during the year, totalling 779, and have been compiled locally.

TABLE SHOWING AGES AND CAUSES OF DEATH FOR THE YEAR
1932.

CAUSES OF DEATH					Sex	All ages	0-	1-	2-	5-	15-	25-	35-	45-	55-	65-	75-
ALL CAUSES					M.	406	49	15	7	11	14	20	21	31	73	95	70
					F.	370	39	15	12	15	16	21	22	30	57	61	82
1 Typhoid and paratyphoid fevers...					M.	—	—	—	—	—	—	—	—	—	—	—	—
					F.	1	—	—	—	—	—	1	—	—	—	—	—
2 Measles					M.	10	2	5	2	1	—	—	—	—	—	—	—
					F.	14	—	7	4	3	—	—	—	—	—	—	—
3 Scarlet fever					M.	—	—	—	—	—	—	—	—	—	—	—	—
					F.	—	—	—	—	—	—	—	—	—	—	—	—
4 Whooping cough					M.	3	2	1	—	—	—	—	—	—	—	—	—
					F.	3	1	2	—	—	—	—	—	—	—	—	—
5 Diphtheria					M.	2	1	1	—	—	—	—	—	—	—	—	—
					F.	3	—	—	2	1	—	—	—	—	—	—	—
6 Influenza					M.	4	—	—	—	—	—	—	—	1	—	2	1
					F.	13	2	—	—	1	—	2	3	—	1	2	2
7 Encephalitis lethargica					M.	1	—	—	—	—	1	—	—	—	—	—	—
					F.	—	—	—	—	—	—	—	—	—	—	—	—
8 Cerebro-spinal fever					M.	3	—	1	—	1	—	—	1	—	—	—	—
					F.	4	1	—	—	2	—	—	—	—	1	—	—
9 Tuberculosis of respiratory system					M.	33	—	1	—	—	3	9	7	7	4	2	—
					F.	19	—	—	2	1	9	4	2	—	1	—	—
10 Other tuberculous diseases					M.	6	—	1	—	1	2	1	—	—	1	—	—
					F.	4	—	1	—	—	—	—	3	—	—	—	—
11 Syphilis					M.	2	—	—	—	—	1	—	—	—	1	—	—
					F.	3	—	—	—	—	1	—	1	—	1	—	—
12 General paralysis of the insane, tabes dorsalis					M.	3	—	—	—	—	—	—	—	1	2	—	—
					F.	1	—	—	—	—	—	1	—	—	—	—	—
13 Cancer, malignant disease					M.	45	—	—	—	—	—	2	3	4	14	17	5
					F.	42	—	—	—	—	—	1	3	11	13	11	3
14 Diabetes					M.	—	—	—	—	—	—	—	—	—	—	—	—
					F.	2	—	—	—	—	—	1	—	—	1	—	—
15 Cerebral haemorrhage					M.	25	—	—	—	—	—	—	—	2	5	9	9
					F.	29	—	—	—	—	—	1	—	2	7	7	12
16 Heart disease					M.	70	—	—	—	—	—	2	5	1	14	29	19
					F.	65	—	—	1	1	1	—	4	4	12	19	23
17 Aneurysm					M.	1	—	—	—	—	—	—	—	—	1	—	—
					F.	—	—	—	—	—	—	—	—	—	—	—	—
18 Other circulatory diseases					M.	23	—	—	—	—	—	—	—	1	5	8	9
					F.	9	—	—	—	—	—	—	—	1	2	—	6
19 Bronchitis					M.	19	2	—	—	—	—	—	—	3	3	4	7
					F.	17	2	—	—	—	—	—	—	—	—	5	10
20 Pneumonia (all forms)					M.	35	13	2	4	—	—	—	—	3	5	6	2
					F.	32	6	4	2	2	—	2	2	5	3	2	4
21 Other respiratory diseases					M.	1	—	—	—	—	—	—	—	—	—	1	—
					F.	4	1	—	—	—	—	—	1	—	1	—	1
22 Peptic ulcer					M.	3	—	—	—	—	—	1	1	—	1	—	—
					F.	—	—	—	—	—	—	—	—	—	—	—	—

Table showing ages and causes of death for the year 1932—Continued.

[illegible]

the following table the vital statistics of the Borough in relation to the months of the year are given :—

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total 1932
Fall—No. of wet days	12	7	14	26	20	5	21	8	14	20	15	14	176
Inches of rain	1.23	0.24	1.25	2.81	6.40	0.54	2.96	1.93	1.36	3.05	1.33	0.84	23.94
Maximum daily fall—day ...	6th	10th 25th	22nd	3rd	21st	30th	11th	28th	22nd	21st	22nd	14th	—
Maximum daily fall—inches	0.52	0.05	0.31	0.39	3.55	0.30	0.66	0.79	0.25	0.48	0.27	0.20	—
hs— Legitimate	92	89	110	113	108	105	131	104	92	85	91	91	1211
Illegitimate	3	6	4	6	4	4	6	3	4	3	5	6	54
Total	95	95	114	119	112	109	137	107	96	88	96	97	1265
Birth rate	16.32	16.32	19.59	20.45	19.25	18.74	23.55	18.40	16.50	15.12	16.50	16.67	18.11
ths— Gross	98	105	105	78	68	66	66	73	58	72	70	84	943
Outward transfers	20	19	14	18	16	18	18	22	11	21	17	20	214
Inward transfers	7	4	8	3	6	—	3	4	6	4	2	3	50
Nett	85	90	99	63	58	48	51	55	53	55	55	67	779
Death rate	14.61	15.46	17.02	10.82	9.97	8.25	8.81	9.45	9.11	9.45	9.45	11.52	11.15
Deaths under 1 year of age ...	11	8	9	9	10	7	5	8	4	5	5	8	89
Infantile mortality rate per 1000 b'ths	116	84	79	76	89	64	36	75	42	57	52	82	70
Small-pox	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	7	18	13	12	7	10	7	5	11	8	3	3	104
Scarlet fever	7	7	7	6	7	5	5	11	10	21	12	16	114
Typhoid and paratyphoid fevers	4	—	2	—	—	—	3	1	1	4	—	—	15
Erysipelas	2	4	6	3	1	2	1	1	3	2	12	5	42
Pneumonia	25	37	24	11	9	8	7	7	6	3	10	8	155
Chicken-pox	11	5	12	11	23	38	37	34	32	84	88	69	444
Encephalitis lethargica	—	—	—	—	—	—	—	—	—	—	—	1	1
Cerebro-spinal fever	1	4	2	3	—	2	—	—	1	—	—	—	13
Acute polio-myelitis	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	295	333	382	291	104	40	7	2	—	2	1	1	1458
German measles	—	—	—	3	1	1	—	—	—	—	1	—	6
Puerperal fever	—	1	—	—	2	1	—	1	—	—	—	1	6
Puerperal pyrexia	—	—	1	2	1	—	2	1	1	1	—	1	10
Ophthalmia neonatorum	—	—	—	2	1	—	2	1	—	—	—	—	6
Pemphigus neonatorum	—	—	1	—	—	—	—	—	—	—	—	—	1
Pulmonary tuberculosis— Males	3	6	7	6	3	7	5	8	3	2	3	3	56
Females	4	4	6	3	2	8	3	1	3	4	—	6	44
Other forms of tub'culosis— Males	2	3	2	1	3	—	1	1	—	3	1	4	21
Females	2	2	4	—	1	3	—	4	—	1	1	1	19
Small-pox	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	4	6	8	3	—	2	1	—	—	—	—	—	24
Scarlet fever	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping cough	1	—	1	1	1	—	—	—	—	—	1	1	6
Diphtheria	2	—	2	1	—	—	—	—	—	—	—	—	5
Typhoid fever	1	—	—	—	—	—	—	—	—	—	—	—	1
Erysipelas	—	—	1	—	—	—	—	—	—	—	—	1	2
Influenza	2	5	4	1	1	1	—	—	—	1	1	1	17
Diarrhoea & enteritis (under 2 yrs)	—	—	—	—	—	—	3	—	—	1	—	—	4
Tuberculosis— respiratory ...	5	8	8	5	5	1	4	3	1	4	2	4	50
other forms ...	—	1	3	—	—	—	1	1	—	1	1	1	9
Bronchitis	4	4	5	3	1	1	1	2	1	4	2	4	32
Pneumonia	14	16	7	8	3	5	2	4	2	2	3	8	74
Malignant disease	7	5	8	4	5	11	9	5	6	11	6	9	86
Diseases of the heart	18	17	10	7	16	9	7	11	12	10	8	7	132
Nephritis and Bright's disease ...	1	1	1	2	1	—	—	1	3	1	—	2	13

In the subsequent table the vital statistics of the Borough in relation to the various wards are shown :—

					East Ward	St. Ann's Ward	Clifton Ward	South Ward	West Ward	North Ward	Thorn- hill Ward	Mas- bro' Ward	Kimber- worth Ward	Total 1932
Estimated population					11360	8340	8050	5070	5850	7460	7360	7970	8360	69820
Number of houses					2861	2013	2287	1379	1174	1800	1648	1700	2147	17009
Acreage					472.016	121.500	519.228	430.500	563.000	300.000	197.300	411.300	2878.961	5893.805
Density of houses per acre					6.06	16.57	4.40	3.20	2.08	6.00	8.35	4.13	0.74	2.89
Density of population per acre					24.07	68.06	15.50	11.78	10.40	24.87	37.30	19.38	29.03	11.85
Births—	Legitimate				163	154	164	47	102	131	150	165	135	1211
	Illegitimate				5	8	5	4	6	5	7	7	7	54
	Total				168	162	169	51	108	136	157	172	142	1265
	Birth rate				12.14	19.42	21.00	10.06	18.46	18.23	21.33	21.58	16.98	18.11
Deaths—	Gross				84	94	159	71	206	70	91	89	79	943
	Outward transfers				4	1	61	—	141	—	—	2	5	214
	Inward transfers				9	5	4	2	4	4	2	10	10	50
	Nett				89	98	102	73	69	74	93	97	84	779
	Death rate				7.83	11.75	12.67	14.40	11.80	9.92	12.64	12.17	10.05	11.15
Nett deaths under 1 year of age					5	17	14	7	10	7	14	9	6	89
Infantile mortality rate per 1000 births					30	105	83	137	93	51	88	52	42	70
CASES OF INFECTIOUS DISEASE REPORTED	Small-pox				—	—	—	—	—	—	—	—	—	—
	Diphtheria				16	17	7	6	7	5	19	12	15	104
	Scarlet fever				16	8	19	3	10	14	12	21	11	114
	Typhoid and paratyphoid fevers				—	—	3	—	7	—	1	1	3	15
	Erysipelas				10	3	3	1	5	4	5	5	6	42
	Pneumonia				11	9	12	5	25	30	9	10	44	155
	Chicken-pox				56	130	20	29	20	37	45	56	51	444
	Encephalitis lethargica				—	1	—	—	—	—	—	—	—	1
	Cerebro-spinal fever				4	2	2	1	1	—	—	2	1	13
	Acute polio-myelitis... ..				—	—	—	—	—	—	—	—	—	—
	Malaria				—	—	—	—	—	—	—	—	—	—
	Measles				173	121	153	73	158	135	218	239	188	1458
	German measles				2	—	1	—	3	—	—	—	—	6
	Puerperal fever				—	1	—	—	2	1	1	—	1	6
	Puerperal pyrexia				1	—	2	—	1	4	1	—	1	10
	Ophthalmia neonatorum				—	—	1	—	2	—	—	2	1	6
	Pemphigus neonatorum				—	—	—	—	1	—	—	—	—	1
	Pulmonary tuberculosis— Males				8	7	10	2	6	3	6	8	6	56
	Females				4	13	3	—	6	3	7	6	2	44
	Other forms of tuberculosis— Males				1	5	—	2	2	2	1	6	2	21
	Females				3	1	3	1	1	1	3	5	1	19
DEATHS	Small-pox				—	—	—	—	—	—	—	—	—	—
	Measles				1	2	3	3	2	2	3	5	3	24
	Scarlet fever				—	—	—	—	—	—	—	—	—	—
	Whooping cough				—	4	—	—	—	—	—	1	1	6
	Diphtheria				—	—	—	—	—	—	2	2	1	5
	Typhoid fever				—	—	—	—	—	—	1	—	—	1
	Erysipelas				—	1	—	—	1	—	—	—	—	2
	Influenza				3	2	3	3	3	1	1	1	—	17
	Diarrhoea and enteritis (under 2 yrs)				—	1	2	1	—	—	—	—	—	4
	Tuberculosis—respiratory				8	5	9	3	4	3	7	6	5	50
	other forms				2	—	—	—	1	—	3	2	1	9
	Bronchitis				2	2	6	4	4	5	3	1	5	32
	Pneumonia				9	5	10	9	8	10	10	7	6	74
	Malignant disease				16	7	12	6	11	6	6	11	11	86
	Diseases of the heart				11	21	16	17	10	15	14	15	13	132
	Nephritis and Bright's disease				1	1	2	1	1	1	2	1	3	13

The following table shows the birth-rate, death-rate, and analysis of mortality, during the year 1932, compared with England and Wales as a whole and various other areas.

(The mortality rates for England and Wales refer to the whole population but for London and the towns to civilians only.)

	RATE PER 1,000 TOTAL POPULATION.		ANNUAL DEATH-RATE PER 1,000 POPULATION.									RATE PER 1,000 BIRTHS.		PERCENTAGE OF TOTAL DEATHS.				
	Live births.	Still births.	All causes.	Enteric fever.	Small-pox.	Measles.	Scarlet fever.	Whooping cough.	Diphtheria.	Influenza.	Violence.	Diarrhoea and enteritis under two years.	Total deaths under one year.	Certified by registered medical practitioners.	Inquest cases.	Certified by Coroner after P.M.	No Inquest.	Uncertified causes of death.
England and Wales...	15.3	0.66	12.0	0.01	0.00	0.08	0.01	0.07	0.06	0.32	0.53	6.6	65	91.1	6.2	1.8		0.9
118 County Boroughs and Great Towns, including London.	15.4	0.70	11.8	0.00	0.00	0.11	0.01	0.08	0.07	0.28	0.48	8.9	69	91.3	5.9	2.3		0.5
126 Smaller Towns (estimated resident populations 25,000 to 50,000 at Census 1931)	15.4	0.69	10.8	0.00	—	0.06	0.01	0.06	0.03	0.31	0.42	4.5	58	91.9	5.8	1.3		1.0
London	14.2	0.51	12.3	0.00	0.00	0.19	0.02	0.08	0.07	0.27	0.53	12.6	66	89.4	6.2	4.4		0.0
Rotherham	18.1	0.90	11.15	0.00	0.00	0.34	0.00	0.09	0.07	0.24	0.53	3.2	70	90.9	6.2	2.3		0.6

Puerperal sepsis Others Total

The maternal mortality rates for England and Wales are as follow : { per 1,000 live births ... 1.61 4.24

total births ... 1.54 4.06

The maternal mortality rates for Rotherham are as follow : { live births ... 4.74 5.53

total births ... 4.52 5.27

The birth-rate, death-rate, and analysis of mortality during the years 1928-1932 for Rotherham alone are summarised herewith :—

YEAR.	RATE PER 1,000 POPULATION.										RATE PER 1,000 BIRTHS.				
	BIRTH RATE.	DEATH RATE.	Small-pox.	Enteric fever.	Diphtheria.	Scarlet fever.	Measles.	Whooping cough.	Pulmonary tuberculosis.	Other forms of tuberculosis.	Diarrhoea and enteritis under two years.	Total deaths under one year.	Deaths under one week.	Deaths under one month.	Maternal deaths.
1928	19.05	10.58	0.01	—	0.08	0.04	0.03	0.01	0.81	0.20	13.3	71	13	30	4.5
1929	20.01	12.13	—	—	0.01	—	—	0.13	0.65	0.16	9.2	83	27	41	8.3
1930	18.72	10.50	—	—	0.14	0.06	0.27	0.01	0.69	0.13	6.0	74	22	39	3.8
1931	18.18	12.03	—	0.01	0.08	—	0.03	0.10	0.60	0.23	6.3	92	26	43	2.3
1932	18.11	11.15	—	0.00	0.07	0.00	0.34	0.09	0.72	0.13	3.2	70	26	37	5.5
Average ...	18.51	11.28	0.002	0.002	0.07	0.02	0.13	0.07	0.69	0.17	7.6	78	23	38	4.9

SECTION II.

GENERAL PRIVISION OF HEALTH SERVICES IN THE AREA.

PROFESSIONAL NURSING IN THE HOME.

There is no scheme provided by the Local Authority for professional nursing in the home of either (a) general cases or (b) infectious cases.

A grant, however, of £50 a year is made by the Corporation to the Rotherham District Nursing Association. Advice of a general or special nature is also available in the case of certain infectious diseases, such as measles or pneumonia, in the course of the routine visits of the health visitors.

MIDWIVES.

There are twenty-three midwives, to whom no subsidy is granted, in practice in the County Borough.

Three midwives, who, by the approval of the Central Midwives Board, undertake the training of pupils from the Municipal Maternity Home and the Alma Road Hospital, are paid by the Local Authority at the rate of 7/6 per case.

NATIONAL HEALTH INSURANCE.

Apart from the fact that Insurance medical practitioners are required, under their terms of service, to furnish certain reports to the Tuberculosis Officer in connection with the treatment of tuberculosis, and, further, that the Borough Council appoint one-fifth of the members of the Insurance Committee, there are no other points in which the work of the Local Authority is administered in co-operation with the National Health Insurance service.

LABORATORY FACILITIES.

Laboratory arrangements for the examination of clinical materials are provided by the Corporation at the laboratory attached to the Public Health Department, Town Hall, Rotherham, and the work is performed by the Medical Officer of Health and his assistants.

Particulars of the examinations during the year 1932 are given in Section VI. of this report.

Bacteriological work of a more detailed character, such as biological tests, virulence tests, Wassermann re-actions, blood cultures, etc., are sent to Sheffield University.

Chemical investigations are carried out by the Public Analyst on behalf of the Local Authority, the Senior Sanitary Inspector and the Assistant Senior Sanitary Inspector being the authorised inspectors under the Acts.

In Section V. of this report details are given of samples taken, summonses issued, convictions obtained, and the amounts of the penalties received.

LEGISLATION IN FORCE.

The local Acts, general adoptive Acts, special local Regulations, and Bye-laws relating to the public health, in force in the area, are as follow :—

LOCAL ACTS.

The First Public Health Supplement Act, 1852.
 Rotherham and Kimberworth Local Board of Health Act, 1863.
 Rotherham and Kimberworth Local Board of Health Act, 1870.
 Rotherham Borough Extension and Sewerage Act, 1879.
 Rotherham Corporation Act, 1904.
 Rotherham Corporation Act, 1911.
 Rotherham Corporation Act, 1915.
 Rotherham Corporation Act, 1921.
 Rotherham Corporation Act, 1924.
 Rotherham Corporation Act, 1928.
 Rotherham Corporation Act, 1930.

GENERAL ADOPTIVE ACTS.

The Infectious Diseases (Prevention) Act, 1890.
 The Public Health Acts (Amendment) Act, 1890, Parts 1, 2, 3, and 5.
 The Notification of Births Act, 1907.

Sections of the Public Health Acts (Amendment) Act, 1907 in force as follow :—

- Part 2. (Streets and Buildings) Sections 16, 19, 22, 23, 24, 25, 32, and 33.
- Part 3. (Sanitary Provisions) Sections 34, 36, 43, 48, 50, and 51.
- Part 4. (Infectious Diseases) Sections 52, 55, 56, 63, and 64.
- Part 5. (Common Lodging Houses) Sections 69, 70, 71, 72, 73, 74, and 75.
- Part 7. (Police) Section 78 (Regulations as to Street Traffic) Sections 79, 80, 85, and 86.
- Part 8. (Fire Brigade) Sections 87, 88, 89, and 90.
- Part 10. (Miscellaneous) Section 93.

Public Health Act, 1925, Sections 14, 15, 16, 20, 21, 24, 26, 30, 35, 37, 45, 51, and 55.

SPECIAL LOCAL REGULATIONS.

Measles and German Measles, 1920.

BYE-LAWS.

Nuisances, the Keeping of Animals, and the Cleansing of Footways and Pavements, 1893.
 Slaughterhouses, 1893.
 Common Lodging Houses, 1893.
 Locomotives on Highways, 1901.
 Houses Let in Lodgings, 1920.
 Offensive Trades, 1922.
 Pleasure Fairs, 1922.
 Tents, Vans, Sheds, and similar structures used for human habitation, 1923.
 New Streets and Buildings, 1925.
 Drainage of Existing Buildings, 1926.
 Nursing Homes, 1928.
 Deposit of Litter, 1932.

No new local legislation, except the byelaws relating to the deposit of litter, was put into force during the year 1932.

HOSPITALS.

The summary of hospital accommodation as outlined in the report for 1931 remains unchanged except for the increased accommodation at the St. Catherine's Certified Institution under the South-west Yorkshire Joint Board for Mental Defectives where the accommodation has been increased to 140 beds of which Rotherham's proportion is 20 beds.

The following table gives details with regard to the hospitals under the control of the Local Authority concerning the classification of the medical and nursing staffs on 31st December, 1932, and the employment of consultants.

Name.	Medical staff.	Nursing staff.	Consultants.
Oakwood Hall Sanatorium	2 1 part time	Matron ... 1 Sisters ... 4 Nurses ... 14	Orthopaedic Surgeon when required.
Isolation Hospital	1 part time	Matron ... 1 Sister ... 1 Nurses ... 9	Surgeon when required
Ferham House Maternity Home	1 part time	Matron ... 1 Sisters ... 2 Nurses ... 4	Obstetric Surgeon employed
Kimberworth Hospital	1 part time	Staffed from Isolation Hospital when required	
Alma Road Hospital	2	Matron ... 1 Sisters ... 11 Nurses ... 59 Male Nurses 4	1 Consultant Surgeon. 1 Consultant Physician. 1 Consultant Ophthalmic Surgeon. 2 Consultants-Nervous Diseases (part time). 1 Anæsthetist (part time)

In the following table is specified the bed accommodation of the various hospitals in the Borough relating to defined grouping of case material.

	General Hospital.	Alma Road Hospital.	Oakwood Hall Sanatorium	Isolation Hospital.	Ferham House Maternity Home.	Kimber- worth Hospital.
Medical	36	97	—	—	—	—
Surgical	72	43	—	—	—	—
Children	22	47	—	—	—	—
Chronic sick	—	75	—	—	—	—
Venereal	—	2	—	—	2	—
Tuberculosis	—	21	100	—	—	—
Isolation	—	—	—	64	—	17
Maternity	—	15	—	—	10	—
Mental and mental defectives	—	50	—	—	—	—

It should be noted that the three hospitals, the General, Alma Road, and Oakwood, are not utilised solely by the County Borough. The General Hospital is available for the whole of the surrounding area, the proportion of the Borough patients to the whole treated being in the neighbourhood of 75 per cent. Alma Road Hospital serves the areas of the Rotherham County Borough and the Rother Valley Public Assistance Committees, with a population of approximately 187,750. Oakwood Hall Sanatorium, with its 100 beds, has 30 definitely allocated to the West Riding County Council by agreement.

ALMA ROAD HOSPITAL.

The following extracts from Form Hosp. 6 of the Ministry of Health give details of the institutional treatment of the sick in Alma Road Hospital, Rotherham. This institution is maintained as a hospital under the Poor Law Act.

The total number of beds available for sick, maternity, and mental cases is as follows :—

For men	142	} excluding 11 cots in maternity wards.
For women	...	...	...	145
For children under 16 years	...			63	
Total	...	...	...	350

The following table shows the classification of the accommodation for the sick and the number of beds occupied on 31st December, 1932.

Classification of wards.	Number of wards.	BEDS							
		MEN		WOMEN		CHILDREN (under 16 years of age)		Total.	
		Pro- vided	Occu- pied	Pro- vided	Occu- pied	Pro- vided	Occu- pied	Pro- vided	Occu- pied
1 Medical	...	6	49	48	48	32	—	97	80
2 Surgical	...	4	27	15	16	9	17	60	30
3 Children (med.)	...	3	—	—	—	—	30	30	29
4 Chronic sick	...	3	25	25	50	46	—	75	71
5 Venereal	...	1	2	—	—	—	—	2	—
6 Tuberculosis	...	2	9	6	6	5	6	21	13
7 Isolation	...	—	—	—	—	—	—	—	—
8 Maternity	...	1	—	—	15	9	—	15	9
9 Mental	...	2	23	21	18	15	—	41	36
(a) Short stay	...	—	—	—	—	—	—	—	—
(b) Long stay	...	—	—	—	—	—	—	—	—
10 Mental defectives	...	1	—	—	—	—	9	9	6
11 Other maternity cots	—	—	—	—	—	—	11	11	7
Total	...	23	135	115	153	116	73	361	281

The following gives the statistics of in-patients relating to the year 1932.

DISEASE GROUPS	Children (under 16 years of age).		Men and women.	
	Dis- charged	Died	Dis- charged	Died
Acute infectious disease	11	5	9	1
Influenza	2	1	18	6
Tuberculosis—				
(1) Pulmonary	1	3	20	10
(2) Non-pulmonary	6	2	10	3
Malignant disease	—	—	32	38
Rheumatism—				
(1) Acute rheumatism (rheumatic fever) together with sub-acute rheumatism and chorea	10	1	16	—
(2) Non-articular manifestations of so-called “ rheum- atism ” (muscular rheumatism, fibrositis, lumbago and sciatica)	—	—	28	1
(3) Chronic arthritis	—	—	6	—
Venereal disease	1	1	7	2
Puerperal pyrexia	—	—	2	—
Puerperal fever (a) Women confined in the hospital	—	—	—	1
(b) Admitted from outside	—	—	1	1
Other diseases and accidents connected with child bearing	1	1	142	3
Mental diseases (a) Senile dementia	—	—	17	26
(b) Other	6	1	83	1
Senile decay	—	—	8	41
Violence	32	3	136	11
<i>In respect of cases not included above :</i>				
Disease of the nervous system and sense organs ...	28	—	153	14
Disease of the respiratory system	108	21	152	29
„ „ circulatory „	2	2	97	44
„ „ digestive „	69	12	235	8
„ „ genito-urinary „	23	—	90	8
„ „ skin	58	—	53	—
Other diseases	42	3	30	—
Mothers and infants discharged from maternity wards and not included in above figures. Mothers	1	—	184	3
Infants	160	9	—	—
TOTALS ...	561	65	1529	251

MATERNITY AND NURSING HOMES.

Two maternity homes in the Borough are registered under the provisions of the Nursing Homes Registration Act, 1927, one as a maternity home only and the other as a nursing and maternity home. An application for the registration of a nursing home was refused during the year, and an order was subsequently made. No registrations were cancelled during the year and no applications for exemption from registration were applied for.

The homes have been inspected by the Maternity and Child Welfare Medical Officer, and in one case it was necessary to institute proceedings owing to the contravention of certain provisions. The statement of the offences was as follows :—

1. Failure to display certificate (Nursing Homes Registration Act 1927. Section 1 (4)).
2. Failure to make entry in register. Byelaw No. 2.
3. Failure to notify Medical Officer of Health on death of patient. Byelaw No. 5.

The pleas entered were not guilty on charges No. 1 and 2, and guilty on No. 3. After hearing evidence the defendant was found guilty and fined 10/— on count No. 1 and counts Nos. 2 and 3 were each dismissed on payment of costs (4/— each).

The other home was found to be satisfactory.

MATERNAL MORTALITY.

During the year investigations have been made into all maternal deaths occurring in the Borough, and the results of each enquiry have been forwarded to the Maternal Mortality Committee, or in the case of extra urban deaths, to the responsible authority for the area in which the case was normally resident, for transmission to that committee.

All cases of puerperal fever and puerperal pyrexia are enquired into by the Medical Officer for Maternity and Child Welfare, and particulars of these enquiries will be found in Section IX. of this report.

The steps taken by this department arising out of Circular 1167 and Memo 156/M.C.W. are as under :—

Certain recommended services were in operation already when the circular and memo were issued. These were, the provision of sterilised maternity outfits ; home helps ; free and assisted milk supply ; provision of laboratory facilities ; educational measures ; obstetric consultant for ante-natal sessions, lying in wards, and for puerperal fever and pyrexia.

Measures which have since been adopted include the appointment of a lady medical officer for 2 extra medical sessions in child welfare and an ante-natal and post-natal clinic for district and midwives cases not booked for the Municipal Maternity Home. These cases are also seen on reference by the obstetric consultant. There has also been established a fortnightly clinic at Thorpe Hesley for general maternity and child welfare purposes.

Arrangements are now available whereby a woman booking a midwife may state the name of the doctor desired in any emergency. In this way ante-natal findings are transmitted to the practitioner.

The question of municipal midwives was very carefully considered by the local authority but at that time there was a sufficiency of midwives in the Borough. This should be further considered in the near future.

The question of a new maternity home for cases needing institutional treatment including not only complications of labour and the puerperium but also patients suffering from abnormal ante-natal conditions and intercurrent diseases and for patients whose houses are unsuitable should be considered at an early date. This visualised institution would replace the existing Municipal Maternity Home at Ferham House.

INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS, AND HOMELESS CHILDREN.

There have been no changes in the arrangements made for the above as enumerated in the report for 1931.

INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.

No institutional accommodation has been provided for the care of mental defectives solely for the use of local cases. Rotherham is, however, one of the constituent authorities of the South-West Yorkshire Joint Board for Mental Defectives, and during the year 1932, two additional villas with accommodation for a further 120 patients were added, making the total available accommodation at the end of the year of 140 beds.

The present allocation of these beds for Rotherham is 20, 3 male and 17 female, and these are all occupied. It is hoped during the forthcoming year that a further extension will become available for male cases which will greatly ease the question of obtaining suitable accommodation which has been experienced in past years.

The 47 mental defectives who are present in certified or approved institutions are accommodated in the following :—St. Catherine's, Whittington Hall, Stoke Park Colony, Prudhoe Hall, Eagle House, Calderstones Institution, David Lewis Colony, Royal Albert Institution, and Rampton State Institution.

The cases include all types.

AMBULANCE FACILITIES.

There are two motor ambulances, one specifically used for small-pox, and one for the other infectious diseases requiring removal to the Isolation Hospital.

Accidents, non-infectious cases and maternity cases are dealt with by the Police.

CLINICS AND TREATMENT CENTRES.

The following is a list of the out-patient departments under the control of the Corporation and provided by them, together with the sessional times, and attendances for 1932 :—

	Situation	Sessional time	Attendances 1932
1. CHILD WELFARE			
Ferham House	Kimberworth Road	Tuesday, Friday afternoons	8834
Cranworth Centre	Cranworth Road	Monday, Thursday afternoons	10911
Thorpe Hesley School	Thorpe Hesley	Alternate Wednesday afternoons	277
2. ANTE-NATAL			
Ferham House (Maternity Home cases)	Kimberworth Road	Wednesday afternoons	1046
Ferham House (District cases)	Kimberworth Road	Monday afternoons	659
Alma Road Hospital (Maternity ward cases)	Alma Road	Friday mornings	587
3. POST-NATAL			
Ferham House	Kimberworth Road	Monday afternoons	26
4. SCHOOL CHILDREN			
Ferham House	Kimberworth Road	Each morning	16917
Cranworth Centre	Cranworth Road	Each morning	20672
Thorpe Hesley School	Thorpe Hesley	One morning weekly	888
Herringthorpe School	Herringthorpe	One afternoon weekly	300
Blackburn School	Blackburn	As required	24
5. ORTHOPAEDIC			
Cranworth Centre	Cranworth Road	One afternoon monthly	187†
6. REMEDIAL, ETC.			
Cranworth Centre	Cranworth Road	Four mornings weekly	4350†
7. OPHTHALMIC			
Ferham House	Kimberworth Road	One morning weekly	
Cranworth Centre	Cranworth Road	alternately	1258†
8. DENTAL			
Ferham House	Kimberworth Road	Eight half days weekly	4970†
Cranworth Centre	Cranworth Road		
Blackburn School	Blackburn	As required	
9. TUBERCULOSIS			
Dispensary	Frederick Street	Monday, Wednesday afternoons	1982
10. VENEREAL DISEASES			
Centre	Frederick Street	Daily	9600
11. LIGHT TREATMENT			
Ferham House	Kimberworth Road	Monday, Wednesday and Friday mornings	3628
12. OUT-PATIENT DEPARTMENT			
Alma Road Hospital	Alma Road	Daily	12300
13. MENTAL CLINIC			
Alma Road Hospital	Alma Road	One afternoon weekly	
14. BIRTH CONTROL			
Ferham House	Kimberworth Road	Monday afternoons	17

In addition 945 attendances were made at the school baths at Ferham House.

† These attendances are included in those of No. 4.

The minor ailment clinic at Herringthorpe School (included in No. 4) was discontinued during the year, owing to the room in which it was held being required as a class room.

It should be noted that whilst the dental clinic, orthopaedic clinic, and remedial exercises clinic are under the Education Authority, children under five years of age can have treatment by arrangement, when referred by the medical officers of the child welfare centres.

During the year 236 were so referred for dental treatment and 20 for orthopædic.

There are no day nurseries in Rotherham.

Further details of the maternity and child welfare scheme will be found in Section IX. of this report.

LOCAL GOVERNMENT ACT, 1929.

The arrangements made under the above Act were described in my annual report for 1931, and no changes have taken place during the year.

POOR LAW MEDICAL OUT-RELIEF.

No changes have taken place in the arrangements made for this service.

SECTION III.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER.

The supplies obtained during 1932 were as follow :—

From Derwent Valley Water Board (via Sheffield), 668,000 gallons per day.

From Langsett (Sheffield Corporation) 1,600,000 gallons per day.

The above includes all water supplied in bulk by Rotherham to Rawmarsh and Greasbrough.

The emergency supply from Ulley reservoir (Rotherham Corporation) has not been called upon during the year.

The service reservoir capacity of the existing works is $4\frac{1}{2}$ million gallons, which is equivalent to 1–4/5th days supply for the Borough and areas supplied in bulk.

The whole of the distribution in the Borough is effected by gravitation, with the following exceptions :—

Langsett water pumped from Boston reservoir to Boston overhead tank to supply high level areas in Moorgate and Broom Road.

Derwent water pumped from Kimberworth reservoir to Keppel's Column reservoir during periods of maximum "draw-off" to supply high level areas in Thorpe Hesley and Scholes.

The general condition of the town mains is being steadily improved both by the renewal of the older pipes by concrete lined pipes of increased capacity and by the continued scraping of mains.

HOUSING SITES.

Further extensions to the distribution system have been made to supply the new housing sites at Herringthorpe and Eastwood, both obtaining supplies of Langsett water.

TOWN AREA.

Improvement and extensions to the distribution system in the centre of the town have been executed to ensure an adequate supply to the improved areas, particularly for fire protection purposes.

CHARACTER OF WATER.

Samples of water from the distribution system have been taken at intervals throughout the year and submitted to the Public Analyst for analysis and report. These reports have, in all cases, been completely satisfactory and the following are typical examples :—

					Langsett water.	Derwent water.
PHYSICAL CHARACTERS.						
Suspended matter	...	...	...	...	Faint trace	None
Appearance of a column 2ft. long	...	...	...	...	slightly cloudy, brownish yellow.	clear, faintly yellowish.
Taste	...	...	...	...	Normal.	Normal.
Odour	...	...	...	...	None.	None.

					Parts per 100,000	
CHEMICAL EXAMINATION.						
Total solid matter	...	...	...	...	8.00	9.00
Loss on ignition	...	...	...	...	2.40	2.00
Chlorine	...	...	...	...	1.14	1.14
Equivalent to sodium chloride	...	...	...	...	1.89	1.89
Nitrites	...	...	...	...	None.	None.
Nitrates as nitrogen	...	...	...	...	0.04	0.03
Poisonous metals (lead, etc.)	...	...	...	...	None.	None.
Total hardness	...	...	...	...	3.3	3.3
Oxygen absorbed, 4 hours at 80 deg. F.	...	...	...	...	0.207	0.051
Ammoniacal nitrogen	...	...	...	...	0.0007	Nil.
Albuminoid nitrogen	...	...	...	...	0.0060	0.0020

BACTERIOLOGICAL EXAMINATION.

B. coli. test.

Presumptive coli organisms (MacConkey's salt lactose broth)	Absent in 50 c.c.	Absent in 50 c.c.
----------------------------------------------------------------	-----	-----	-----	----------------------	----------------------

RIVERS AND STREAMS.

The supervision of rivers and streams in the County Borough rests with the West Riding Rivers Board.

DRAINAGE AND SEWERAGE.

By means of a high level and also a low level sewer, the sewage of the greater part of Rotherham is conveyed to the Aldwarke Sewage Works on the banks of the river Don. The method of purification is by the bio-aeration process.

The village of Thorpe Hesley has a separate sewerage system and sprinkler filter, and the sewage from Blackburn is treated at the adjacent disposal works of the City of Sheffield.

Cesspools exist in the unsewered parts of the district.

During the year the drains of 2 houses, which previously discharged into a cesspool, were connected to the sewers.

CLOSET ACCOMMODATION.

During the year 5 privies were abolished and water closets substituted, and 2 were abolished where no water closet was substituted.

The number of privies remaining at the end of 1932 was as follows :—

Within the drainage area	...	...	...	...	19
Outside the drainage area	...	...	...	...	124
				—	143

The following is a statement of privies converted or abolished and dry ashpits abolished since 1911 :—

Year	Privies converted or abolished.	Dry ashpits abolished.	Year	Privies converted or abolished.	Dry ashpits abolished.
1911	734	—	1922	13	47
1912	175	—	1923	11	13
1913	63	—	1924	2	46
1914	21	29	1925	9	37
1915	7	32	1926	9	34
1916	—	1	1927	14	40
1917	—	1	1928	15	24
1918	—	1	1929	5	41
1919	8	3	1930	19	124
1920	32	62	1931	26	220
1921	20	83	1932	7	102

PUBLIC CLEANSING.

The cleansing of privies and cesspools, and the removal and disposal of house refuse, are undertaken by the Cleansing Department of the Borough Engineer.

Privies in the urban parts of the Borough are emptied every fortnight. Those in the rural parts are emptied every eight weeks, or more frequently as required.

Pail closets, fixed ashpits, and movable bins are emptied weekly. Cesspools are emptied by mechanical emptier as required.

The total amount of refuse collected and disposed of during the year ended 31st March, 1933, amounted to 18,794 tons, and represents 14.74 cwts. per 1,000 population per day.

The Destructor was closed on 28th February, 1932, on the lines suggested by the Ministry of Health.

The following statement gives details of the arrangements of public cleansing in the Borough :—

(a) Method of collecting dry house refuse.	Dustbins carried by collectors from premises to horse drawn and low loading petrol driven vehicles at kerbside.
(b) Method of collecting refuse from earth closets and privies.	Pits emptied into barrows and wheeled to roadside and collected by horse drawn two-wheel carts.
(c) Method of disposing of dry house refuse.	Controlled tipping under the suggestions laid down by the Ministry of Health, in low-lying areas subject to flood. Afterwards used as recreation grounds.
(d) Method of disposing of refuse from earth closets and privies.	Disposed of as manure to local farmers.
(e) Method of cleaning cesspools.	By mechanical suction petrol driven vehicle.
(f) Method of disposal of cesspool contents.	Disposed of directly into nearest sewer manhole by cesspool machine.

In order to facilitate the provision and maintenance of moveable ashbins, power was granted under the Rotherham Corporation Act, 1930, which enables the Corporation to maintain refuse bins on payment of a certain sum per annum for each premises. This power was put into operation as from the 1st April, 1931, and a charge of 1/6 per annum is made, for which the Corporation maintain and renew bins and provide the initial ashbins when fixed ashpits are abolished. From the commencement of this scheme up to 31st March, 1933, 5,776 ashbins have been provided.

During the year, 102 fixed dry ashpits serving 335 houses and several schools were abolished, leaving 73 to be dealt with.

Street cleansing is undertaken by the Highways Department of the Borough Engineer.

There are $70\frac{3}{4}$ miles of roads in the Borough, of which approximately $18\frac{1}{4}$ miles are cleansed daily.

6	Do.	3 times per week.
20	Do.	twice per week.
$33\frac{1}{2}$	Do.	once weekly.

During the year, 68,189,295 square yards of streets were cleansed, exclusive of footpaths. Total tonnage of street sweepings collected, 1,784 tons.

Also during the year, 322 gullies were emptied by hand and 12,030 by the suction gully emptier.

SANITARY INSPECTION OF THE AREA.

The following is a summary of the work done by the sanitary inspectors during the year, together with a statement of the periodic sanitary work performed by the health visitors.

MALE STAFF.

Complaints investigated	...	...	...	...	...	...	...	...	...	400
Miscellaneous inspections and visits	...	...	...	...	...	...	...	...	...	4508
Re-inspections of nuisances	...	...	...	...	...	...	...	...	...	2450
Inspections of work in progress	...	...	...	...	...	...	...	...	...	924
Visits for sanitary alterations	...	...	...	...	...	...	...	...	...	119
Interviews with owners, agents, and builders				...	...	...	...	...	...	303
Inspections of pleasure fairs	...	...	...	...	...	...	...	...	...	3
„ „ tents, vans, and sheds			...	...	...	...	...	...	...	51
„ „ workshops and factories			...	...	...	...	...	...	...	181
„ „ offensive trades		...	...	...	...	...	...	...	...	286
„ „ cowsheds and dairies	...	...	...	...	...	...	...	...	...	209
„ „ common lodging houses (including visits by Police Inspector)									...	227
„ „ canal boats	...	...	...	...	...	...	...	...	...	3
„ „ houses let in lodgings	...	...	...	...	...	...	...	...	...	30
„ „ premises where made up goods are prepared						...	...	...	...	78
„ „ ice cream makers' premises			...	...	...	...	...	...	...	37
Visits to slaughterhouses	...	...	...	...	...	...	...	...	...	1451
Cases of infectious diseases investigated			...	...	...	...	...	...	...	247
Visits to zymotic contacts	...	...	...	...	...	...	...	...	...	149
Visits during exhumation of human remains				...	...	...	...	...	...	2
Old drains examined	...	...	...	...	...	...	...	...	...	18
Drains tested	...	...	...	...	...	...	...	...	...	134
Number of verbal intimations		...	...	...	...	...	...	...	...	184
„ „ preliminary notices and letters			...	...	...	...	...	...	...	1252
„ „ of statutory notices served			...	...	...	...	...	...	...	94
Matters referred to other Departments			...	...	...	...	...	...	...	86
Samples obtained under Food and Drugs (Adulteration) Act						...	...	...	...	212
Milk samples for bacteriological examination				...	...	...	...	...	...	115
Samples of fertilisers and feeding stuffs			...	...	...	...	...	...	...	5
„ „ water	...	...	...	...	...	...	...	...	...	3
Summonses issued	...	...	...	...	...	...	...	...	...	10
Applications to Court for removal orders (infirm persons)						...	...	...	...	2

FEMALE STAFF.

Inquiries in respect of various infectious diseases	...	...	...	...	...	...	881
Visits to workshops	...	...	...	...	...	...	32
„ „ outworkers	...	...	...	...	...	...	3
„ „ public lavatories	...	...	...	...	...	...	295

In the following summary, details are given of the defects remedied:—

Drains relaid and new drains provided	88
„ repaired, trapped, etc.	78
„ cleansed	215
Soil pipes repaired	4
Cesspools abolished	1
Water closets rebuilt	22
„ repaired	246
„ provided (additional)	98
„ provided in place of privies or pail closets	6
„ cleansed	32
Trough closets converted to waterclosets	2
Pail closets abolished	1
Privies abolished	7
Wet ashpits abolished	7
Dry ashpits abolished	102
Yards paved or paving repaired	203
Walls pointed (houses)	101
Stagnant water removed from cellars	25
Cellars drained	7
Chimneys repaired	25
Roofs repaired	89
Eaves gutters and fall pipes repaired	100
Eaves gutters and fallpipes cleansed	30
Fall pipes disconnected from drains	22
Sinks renewed or repaired	61
Sink waste pipes cleansed	3
Sink wastes renewed or repaired	83
Sink waste pipes disconnected from drains	2
House floors repaired	47
Defective plaster work repaired (houses)	79
Defective ceilings repaired (houses)	50
Ranges and fireplaces repaired	70
Washing coppers repaired or renewed	26
Stairs repaired	11
Window defects remedied (houses)	54
Door defects remedied (houses)	29
Offensive accumulations removed	32
Water supplies taken inside houses	15
Nuisances from the keeping of animals abated	22
Dangerous structures remedied	20
Outbuildings repaired	8
Outbuildings demolished	1
Yards cleansed	20
Manure pits provided or repaired	1
Other matters remedied (unclassified)	80
Nuisances connected with offensive trades remedied	20
Defects connected with factories and workshops remedied	20
Dairy farms improved	5

Seven summonses were issued for unabated nuisances, and an order was made in each case.

SMOKE ABATEMENT.

Under arrangement between the Councils of the City of Sheffield and the County Borough of Rotherham, all the powers relating to the abatement of nuisance from smoke conferred by the Public Health Act, 1875, and the Public Health (Smoke Abatement) Act, 1926, were conferred on the Joint Smoke Abatement Committee in May, 1928. The experience of this committee satisfied them that the area covered by them should be extended, and they invited the Stocksbridge, Rawmarsh, and Greasbro' Urban District Councils, together with the Rotherham and Wortley Rural District Councils, to combine with them. All these councils, with the exception of Wortley Rural District, accepted the invitation; the Sheffield and Rotherham Smoke Abatement Committee was abolished, and the Sheffield, Rotherham and District Smoke Abatement Committee constituted in its place. The new committee commenced its duties on May 12th, 1930, and the work is continuing in quite a satisfactory manner.

The following table shows the work done during the past five years, and the gradual improvement made, in Rotherham.

	1928	1929	1930	1931	1932
No. of observations on chimneys of one hour each	1059	1050	879	607	733
„ minutes during which excessive smoke was emitted	3248	3028½	2183	1769	2311
Average number of minutes during which smoke was emitted	3.4	2.8	2.3	2.9	3.1
No. of intimations served	49	59	44	43	41
„ works visited	49	77	63	63	77
„ statutory notices served	21	23	17	9	6
„ complaints received and attended to ...	6	6	9	4	13
„ chimneys dismantled	2	4	3	1	2
„ chimneys raised	2	—	—	3	2
„ chimneys erected (new)	1	2	6	3	4
„ prosecutions (an abatement order and costs in each case)	2	2	1	1	—

The past year has been one of continued trade depression, and this shows a re-actionary effect on general statistics. Factories are not working under steady load, and intermittent working shows rather abnormal conditions with regard to smoke abatement. The work of re-construction and conversion from coal firing to the use of gas, oil, pulverised fuel, together with mechanical stoking, is steadily progressing.

The following is the list of conversions carried out during the year :—

Number of steam boilers converted from coal to gas firing	...	...	...	1
Number of steam boilers erected for gas firing	...	...	...	1
Number of reheating furnaces converted from coal to gas firing	...	...	...	2
Number of reheating furnaces erected for gas firing	...	...	...	3
Number of tempering furnaces erected for gas firing	...	...	...	2
Number of hardening furnaces erected for gas firing	...	...	...	2
Number of heat treatment furnaces converted from coal to gas firing	...	...	...	2
Number of heat treatment furnaces erected for gas firing	...	...	...	5
Number of new oil fired furnaces	...	...	...	2
Number of steam boilers converted for pulverised fuel firing	...	...	...	1
Number of steam boilers fitted with smoke consuming appliances	...	...	...	4

In addition a new gas main has been constructed from a coke oven works to a large steel works, and when the scheme is completed a number of furnaces will be converted.

The attention given by the Rotherham Corporation to the question of Smoke Abatement has taken a very practical turn. Its achievement is looked upon not so much as an ideal in itself but rather as being an integral part of the scheme for the town's improvement and development.

Considerable quantities of surplus gas are being blown to waste at the coke ovens in and near the town, and for some years the whole of the town's gas supply has been drawn from these coke ovens. Provided a small margin of profit is obtainable the Corporation is prepared to supply to manufacturers, in bulk, crude coke oven gas at 1½d. per therm (7½d. per 1,000 cu. ft.) and purified gas at 2d. per therm (10d. per 1,000 cu. ft.).

In comparison with coal fired producers these prices are attractive and already many manufacturers are benefitting by the reduced costs of production. There is thus an inducement for more trade to come to the town and at the same time a reduction in the smoke nuisance is automatically achieved.

In the domestic field the Rotherham Corporation has recently put into operation a two part tariff system of charging for gas. On principle every consumer—small or large—who pays his appropriate share of the capital and overhead costs of supplying him with gas has the privilege of using all the gas he requires at the same low prices as the largest industrial consumer i.e., 10d. per 1,000 cu. ft. (1/- per 1,000 cu. ft. through slot meters). This system of charging enables a householder to use gas for all domestic purposes—water, heating, fires, cooking, etc.—at an inclusive cost which is less than coal, and already a number of houses are run entirely on gas. The effect of this domestic use of gaseous fuel on the smoke nuisance can be readily imagined.

During the year a new pollution recording station has been put into operation at the Technical School, and here soot deposit records, ultra-violet ray records, and sulphur absorption and deposit records are being taken. When this station is in full operation, records from the Town Hall will be discontinued.

OAKWOOD HALL SANATORIUM.

Month	Ultra-violet ray readings		Soot deposit gauge.					
	Total units	Daily average	Rainfall	Total solids dissolv'd	Total insoluble matter	Equivalent to tons per square mile.		
						Total insoluble	Total soluble	Total solids
			m/m's.	grams.	grams.			
January ...	2.0	0.06	26.3	0.124	0.226	7.58	4.16	11.74
February ...	8.5	0.29	7.2	0.144	0.176	5.90	4.83	10.73
March ...	13.0	0.42	28.7	0.157	0.331	11.10	5.27	16.36
April ...	18.0	0.60	64.4	0.191	0.226	7.58	6.40	13.98
May ...	17.0	0.55	129.5	0.207	0.242	8.11	6.94	15.05
June ...	32.5	1.08	13.8	0.137	0.223	7.47	4.59	12.07
July ...	54.0	1.74	83.2	0.215	0.244	8.18	7.21	15.39
August ...	53.5	1.70	46.6	0.113	0.196	6.57	3.79	10.36
September ...	44.5	1.48	30.2	0.101	0.209	7.01	3.38	10.39
October ...	21.5	0.69	76.5	0.198	0.194	6.50	6.64	13.14
November ...	9.0	0.30	32.1	0.171	0.194	6.44	5.73	12.17
December ...	7.5	0.24	25.6	0.109	0.148	4.96	3.65	8.61
Average ...	23.4	0.76	47.0	0.156	0.217	7.28	5.22	12.08

TOWN HALL.

Month	Ultra-violet ray readings		Soot deposit gauge.					
	Total units	Daily average	Rainfall	Total solids dissolv'd	Total insoluble matter	Equivalent to tons per square mile.		
						Total insoluble	Total soluble	Total solids
			m/m's.	grams.	grams.			
January ...	2.0	0.06	38.2	0.229	0.784	27.25	7.96	35.21
February ...	6.5	0.22	6.5	0.262	0.672	23.36	9.11	32.47
March ...	12.5	0.40	35.2	0.227	0.619	21.51	7.89	29.41
April ...	17.5	0.58	83.6	0.380	0.917	31.87	13.21	45.08
May ...	16.5	0.53	99.7	0.219	0.667	23.19	7.61	30.80
June ...	38.0	1.27	13.0	0.162	0.525	18.24	5.63	23.88
July ...	51.5	1.66	73.4	0.226	0.605	21.03	7.86	28.89
August ...	51.0	1.60	55.4	0.235	0.504	17.52	8.17	25.69
September ...	39.5	1.32	37.4	0.252	0.475	16.51	8.76	25.27
October ...	21.0	0.68	78.2	0.287	0.353	12.27	9.98	22.25
November ...	8.0	0.27	32.7	0.389	0.397	13.80	13.52	27.32
December ...	6.0	0.19	18.8	0.215	1.394	48.46	7.47	55.93
Average ...	22.5	0.73	47.67	0.257	0.659	22.92	8.93	31.85

The following table shows the results obtained at the Technical School since November, together with sulphur dioxide figures as obtained by the lead cone method.

TECHNICAL SCHOOL.

Month	Ultra-violet ray readings		Soot deposit gauge						Sulphur di-oxide estimations (lead cone)
	Total units	Daily average	Rainfall m/m's.	Total solids dissol'd grams.	Total insoluble matter grams	Equivalent to tons per square mile.			Weight of SO ₃ per 100 sq. cms. grammes.
						Total insoluble	Total soluble	Total solids	
November	8.5	0.28	24.1	0.291	0.353	12.83	10.58	23.41	0.1519
December	6.0	0.19	20.6	0.181	0.293	9.86	6.09	15.95	0.1426

OFFENSIVE TRADES.

The following offensive trades existed in the Borough at the end of December, 1932 :—

Fish friers	...	...	...	...	...	...	87
Tripe boilers	...	...	...	...	...	...	3
Gut scrapers	...	...	...	...	...	...	1
Rag and bone dealers	...	...	...	...	...	...	3
Hide and skin dealers	...	...	...	...	...	...	2
Blood driers	...	...	...	...	...	...	1
							—
							97
							==

No new business commenced during the year, whilst one fish fryer and one tripe boiler ceased business.

The following matters were dealt with and remedied :—

Fish fryers' premises :

Lack of cleanliness	...	...	...	...	13
Unsuitable preparing room	...	...	...	...	1
Unsuitable range flue	...	...	...	...	1
Accumulation of refuse	...	...	...	...	2

Rag and bone dealer's premises :

Limewashing	1
-------------	-----	-----	-----	-----	---

Tripe boiler's premises :—

Defective floor	1
-----------------	-----	-----	-----	-----	---

—

19

==

COMMON LODGING HOUSES.

In all, 227 visits were paid to the common lodging-houses in the Borough.

One common lodging-house was closed during the year on account of the condition of the premises, and at the end of the year four were in use.

They were maintained in a cleanly state.

HOUSES LET IN LODGINGS.

Twenty-one premises are registered as houses let in lodgings. These are occupied by 104 families.

In many instances the inmates resorted to the houses let in lodgings on account of lack of alternative accommodation.

Thirty inspections were made during the year, and although the byelaws were not complied with in every respect, the premises were maintained in a reasonable condition.

TENTS, VANS AND SHEDS.

The byelaws relating to tents, vans, and sheds have been found effective in connection with existing structures, and the further powers of the Corporation contained in the Rotherham Corporation Act, 1930, under which, with certain reservations, no tents, vans, sheds or similar structures used or intended to be used for human habitation shall be placed or kept on any land within the Borough without the previous consent of the Corporation, have been useful in controlling new structures.

The number of tents, vans, or sheds, etc., in the Borough occupied as dwellings on the 31st December, 1932, was as follows:—

Occupied vans on wheels	...	...	...	...	16
Vans on wheels with extensions	...	...	...	...	2
Huts not on wheels	...	...	...	...	10
					—
					28
					==

Several of the vans were occupied by travelling hawkers and were pitched temporarily.

Proceedings were instituted for occupying a van for habitation without the previous consent of the Corporation and a fine of 10/— was imposed. The defendant appealed against the refusal of the Corporation to give consent. The appeal was allowed on conditions. The conditions were not complied with and the van was removed out of the district.

FACTORIES AND WORKSHOPS.

The number of workshops on the register at the end of 1932 is set out below:—

Workshops and workplaces (excluding bakehouses)	...	83
Bakehouses (including factory bakehouses)	... ..	17
		—
		100
		==

Details of inspection, including inspections made by the health visitors, are given herewith :—

Premises.	Inspections.	Written. notices.	Verbal. notices.
Factories (including factory laundries)	42	6	2
Workshops (including workshop laundries)	164	2	10
Workplaces (other than outworkers' premises)...	7	—	—
	213	8	12

In the following statement, particulars of the defects found are given :—

Particulars.	Number of defects	
	Found.	Remedied.
Want of cleanliness	10	10
Other nuisances	1	1
Insufficient sanitary accommodation	4	4
Defective sanitary accommodation	4	4
Sanitary accommodation not separate for sexes	1	1
	20	20

Eight complaints were received from H.M. Inspector of Factories, 7 referring to factories, and 1 referring to a workshop.

CANAL BOATS.

The County Borough of Rotherham is not a registration authority for the purposes of the Canal Boats Act.

The following statement summarises the work :—

Number of visits paid to the canal wharf	16
Number of canal boats examined	3
Number of infringements observed	—
Notifications of infectious disease	—

Number of persons on board :	Males.	Females.
Adults	4	3
Children under 12 years	1	1
	—5	—4

—9

No cases of illness were observed.

Very few canal boats stay at the wharfe any length of time, the majority either passing straight through the district or stopping at the wharfe for a few hours to unload part of their cargo or to change horses, then continuing their journey.

DISPOSAL OF THE DEAD.

Although the most modern facilities for cremation are available at the City Road Cemetery, Sheffield, no recent increase in the disposal of the dead by this method can be shown.

I am indebted to the Superintendent, Mr. C. Cook, for the following figures relating to the past 19 years :—

Year.	Number of cremations.				
1913–1924 ... ..	...One each year.				
1925	6
1926	4
1927	5
1928	5
1929	2
1930	3
1931	2
1932	3

SCHOOLS.

No new school has been opened during the year and there have been no important structural changes to record.

The medical inspection of school children in the Borough, carried out by Dr. A. C. Turner and his staff, is under the control of the Education Committee, and as pointed out in previous years, there has been the closest co-ordination between the work of the two departments. Strict attention is paid to the instructions contained in the “Memorandum on Closure of and Exclusion from School, 1927.”

RAG FLOCK ACT.

No flocks are manufactured in the district. One workshop where rag flocks are used in a small way was inspected during the year, and was found to be maintained in a cleanly condition. No samples were taken.

UNDERGROUND SLEEPING ROOMS.

There are no underground sleeping rooms in the Borough, and no regulations have been made under the Housing Act, 1925, Section 18 (1).

SECTION IV.

HOUSING.

In the following table housing statistics for the year 1932 are given :—

I.—INSPECTION OF DWELLING-HOUSES DURING THE YEAR :—

(1)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) and number of inspections made for that purpose	1659
(2)	Number of dwelling-houses (included under sub-head (i) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925, and number of inspections made for that purpose	100
(3)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	47
(4)	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	51

II.—REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICE :—

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers (including houses in respect of which informal notices were served during 1931 and the work was carried out during 1932	1551
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------

III.—ACTION UNDER STATUTORY POWERS DURING THE YEAR :—

A. Proceedings under Sections 17, 18, and 23 of the Housing Act, 1930.

(1)	Number of dwelling-houses in respect of which notices were served requiring repairs	—
(2)	Number of dwelling-houses which were rendered fit after service of formal notices :—	
	(a) By owners	—
	(b) By Local Authority in default of owners	—

B. Proceedings under Public Health Acts.

(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	141
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices (including houses in respect of which notices were served during 1931 and the work was carried out during 1932).	
	(a) By owners	148
	(b) By Local Authority in default of owners	—

C. Proceedings under Sections 19 and 21 of the Housing Act, 1930.

(1)	Number of dwelling-houses in respect of which demolition orders were made	31
(2)	Number of dwelling-houses demolished in pursuance of demolition orders	—
(3)	Number of dwelling-houses demolished in anticipation of formal procedure	6

D. Proceedings under Section 20 of the Housing Act, 1930.

(1)	Number of separate tenements or underground rooms in respect of which closing orders were made	—
(2)	Number of separate tenements or underground rooms in respect of which closing orders were determined, the tenement or room having been rendered fit	—

E. Proceedings under Section 3 of the Housing Act, 1925.

(1) Number of dwelling-houses in respect of which notices became operative requiring repairs	...	...	...	...	...	...	...	...	...	...	...	...	-
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—													
(a) By owners	...	...	...	...	...	...	...	...	...	...	...	...	-
(b) By Local Authority in default of owners						...	...	...	...	...	...	...	-
(3) Number of dwelling-houses in respect of which closing orders became operative in pursuance of declarations by owners of intention to close						...	...	...	...	...	...	...	-

F. Proceedings under Sections 11, 14, and 15 of the Housing Act, 1925.

(1) Number of dwelling-houses in respect of which closing orders were made	...	...	...	...	...	...	...	...	...	...	...	...	-
(2) Number of dwelling-houses in respect of which closing orders were determined, the dwelling-houses having been rendered fit	...	...	...	...	...	...	...	...	...	...	...	...	-
(3) Number of dwelling-houses in respect of which demolition orders were made											...	...	-
(4) Number of dwelling-houses demolished in pursuance of demolition orders											...	...	-

One clearance area comprising 68 houses was represented during the year, and a clearance order made. Proceedings were still pending at the end of the year.

SECTION V.

INSPECTION AND SUPERVISION OF FOOD.

MILK.

Rotherham's milk supply is derived from farms in the West Riding of Yorkshire, the Counties of Stafford, Derby, and Nottingham, and also from producers within our own area.

The following summary shows the number of producers, dealers, and registered premises in the County Borough, together with the number of dealers operating within the local boundaries from premises outside, under the Milk and Dairies Acts and Orders :—

Registered cowkeepers (producers within the County Borough) ...	27
Retail milk purveyors :	
Cowkeepers within the County Borough retailing their own milk	19
Retail roundsmen with premises within the County Borough ...	27
Retailers (not roundsmen) from shops within the County Borough	24
Retail roundsmen from premises outside the County Borough...	58
	128
Registered dairies :	
Where cows are kept	27
Where milk is sold or stored	41
Where receptacles are stored	10
	78

In connection with the designated milks one dealer's licence for the sale of "certified" milk, one supplementary licence for the sale of "pasteurised" milk, and one pasteuriser's license have been issued. "Pasteurised" milk had not been sold as such in Rotherham prior to 1932 ; it now forms a considerable portion of our daily supply.

Extensive reconstructions or conversions in connection with the housing of dairy cattle have been carried out at three farms, and lesser scale improvements (improved drainage and water supply facilities) at two others.

In the important and exhaustive "Report of the Reorganisation Commission for Milk" (1933) it is stated that : ' Short of the cleaning up of the national dairy herd by the slaughter of all reacting cows and heifers—a step which cannot at present be contemplated—the most effective measure that could be introduced for tackling this serious problem of the tuberculous infection of the milk supply is the routine clinical examination of all the dairy cows in the country. We are firmly of opinion that this reform should be introduced with the least possible delay. The frequency

of the inspections might perhaps vary according to the circumstances of the different areas, but, to begin with, inspection twice a year might be aimed at . . . ' Apropos this recommendation it may be noted that routine clinical examinations of all dairy cows and inspections of cowsheds have been made locally four times a year since the Milk and Dairies Order came into operation in 1926. During 1932, 131 visits to 27 local dairy farms and 1412 clinical examinations of bovines were made by the Veterinary Officer. In addition, six farms outside the County Borough were visited and 109 cows examined in connection with the work of tracing infecting animals where the sampling and examination of milk consignments for tubercle bacilli had yielded positive results.

Microscopic and other examinations of milk and sputum made in connection with the work of the Veterinary Officer are summarised below.

	Positive.	Negative.	Total.
Milk samples microscopically examined (individual cows)	4	27	31
Milk samples biologically examined (in- dividual cows)	2	4	6
Milk samples biologically examined (controls)	—	7	7
Milk samples biologically examined (mixed milk)	—	1	1
Sputum microscopically examined ...	1	—	1
	<hr/> 7	<hr/> 39	<hr/> 46

The duties devolving upon local authorities in connection with the Milk and Dairies Order, 1926, and those called for by the Tuberculosis Order, 1925, are complementary to each other. The Tuberculosis Order, to quote the circular issued with it, " aims at the destruction of every cow suffering from tuberculosis of the udder or giving tuberculous milk, and every bovine animal suffering from tuberculous emaciation, or suffering from a chronic cough and showing definite clinical signs of tuberculosis." It enables a local authority, on the report of a veterinary inspector, to order the slaughter of bovines which are giving tuberculous milk or suffering from tuberculosis in the forms stated ; the payment of compensation to the owners of slaughtered animals is also provided for.

During the year under review fourteen cows from local herds were slaughtered—the largest number dealt with in the County Borough in any annual period since the Tuberculosis Order came into operation ; local figures, therefore, support the general opinion that no marked progress has been made towards the eradication of the actual numbers of " open " cases of the disease.

Animals affected with tuberculosis of the udder	...	...	2
Animals giving tuberculous milk and showing lesions of tuber- culosis	...	...	3
Animals suffering from tuberculous emaciation	...	...	1
Animals otherwise affected with tuberculosis	...	...	8
			<hr/> 14

The total amount of compensation paid in respect of the slaughtered cows was £58/5/- and the amount of salvage received £37.

To more effectively implement the work under the Milk and Dairies Order and the Tuberculosis Order a plan of routine milk sampling is pursued and examinations are made for the detection of faulty (unclean) methods of production and handling and of tuberculous infection.

The presence of bacillus coli in milk indicates contamination by dung, and milk produced by good methods contains relatively few of these organisms. In the case of graded milk a standard is imposed—"certified" must contain no coliform bacillus in one-tenth of a cubic centimetre and "grade A" none in one-hundredth—but there is no bacterial standard for ordinary, non-graded milk. Though there is no legal standard it is being increasingly recognised that all cowkeepers can, with careful attention to method, produce milk free from bacillus coli in one-hundredth of a cubic centimetre. The figures in the following table support this view; they also demonstrate that the methods practised by the majority of the producers responsible for Rotherham's supplies are good. It will be observed that almost sixty per cent of the samples contained no bacillus coli in one-hundredth of a cubic centimetre.

Examinations of mixed milk for bacillus coli (94 samples—each examined in three tubes.)

			Percentages.	
			0.1 c.c.	0.01 c.c.
B. coli absent in all tubes	...	...	37.2	59.6
B. coli absent in two tubes	...	...	13.8	12.7
B. coli absent in one tube	...	...	11.8	8.5
B. coli present in all tubes	...	...	37.2	19.2

The satisfactory results noted above were not, unfortunately, matched by those revealed by the examinations for the presence of tubercle bacilli; 76 samples of raw non-graded, mixed milk were examined and 13 of them, or 17.10 per cent. were tuberculous. The greater percentage of infected samples was derived from farms outside the County Borough, 18.75 per cent. of outside produced samples and 8.33 per cent. of locally produced samples being infected. In the case of the locally produced samples the infecting cows were traced and slaughtered, whilst of the twelve samples produced outside, in seven cases the infecting cows were found and slaughtered.

It may be that the statistics for the country as a whole will, when available, show a fairly general increase in the percentage of tuberculous samples. The low prices ruling for fat cows during the year have caused many dairy farmers to continue to breed from, and keep in use as milkers, beasts which, had better prices prevailed, would have been fed and sold for beef; this has resulted in an increase in the percentage of older cows in milk and tuberculosis is more prevalent in the older than in the younger animals.

Of processed and graded milks three samples of “pasteurised” and one of “certified” were examined; the “pasteurised” milks conformed to the requirements of the Milk (Special Designations) Order but the “certified” sample was found to contain coliform bacillus in one-tenth of a cubic centimetre.

MEAT.

The number of private slaughter-houses in the Borough and the nature of the holdings are as follow :—

Registered slaughter-houses	...	...	...	...	...	2
Licensed slaughter-houses	...	...	...	...	...	1
Annually licensed slaughter-houses	...	...	...	...	...	3
						—
						6
						==

In addition to the private slaughterhouses, there is the Public Slaughterhouse at which a whole-time meat inspector is stationed.

The following figures, supplied by the Superintendent, indicate the number of animals slaughtered during 1932 at the abattoir.

Beasts	...	...	...	...	...	...	...	5,175
Calves	...	...	...	...	...	...	...	162
Sheep and lambs	...	...	...	...	...	...	...	9,518
Pigs	...	...	...	...	...	...	...	12,216
								—
								27,071
								==

The number of visits paid by the staff to the whole of the slaughterhouses, including the Public Slaughterhouse, during the year was 1451.

In addition to the written notices of slaughter at the private slaughter-houses, the following notices were received in compliance with the Public Health (Meat) Regulations, 1924 :—

Nature of notices.	Notices received.	Number visited.
A. Private premises (other than private slaughterhouses) :—		
Notices of intention to slaughter	126	126
Emergency slaughter in the Borough	3	3
Emergency slaughter outside the Borough and carcase brought into the Borough for inspection	1	1
B. Private slaughterhouses :—		
Notices of intention to slaughter	5	5
Emergency slaughter	5	5
Emergency slaughter outside the Borough and carcase brought into the Borough for inspection	1	1
Notices to examine meat where there is evidence of disease	8	8
		—
		149
		149

The following summary gives details of the meat seized or surrendered and destroyed during 1932 as unfit for human food, from all causes (including tuberculosis) :—

Number of	Beasts.	Calves.	Sheep and lambs.	Pigs.	Total.
Carcases (including offal)	80	11	218	67	376
Portions of carcases ...	15	—	—	—	15
Heads (including tongues)	325	—	—	521	846
Lungs	1019	—	17	626	1662
Livers	596	—	467	661	1724
Tripes or stomachs ...	258	—	—	—	258
Spleens	163	—	—	75	238
Kidneys	163	—	—	6	169
Hearts	12	—	—	6	18
Udders	267	—	—	—	267
Fats (mesenteries, etc.)	353	—	—	1499	1852

The total weight of fresh meat and offals condemned was allocated as follows :

	Tons.	Cwts.	Stones
Public Slaughterhouse	55	13	0
Private slaughterhouses	1	9	5
Other private premises	—	6	5
	57	9	2

Tuberculosis was the reason for the condemnation of 72.2 per cent. of the total weight of fresh meat and offals condemned during the year.

Particulars of the tuberculous meat seized or surrendered and destroyed during 1932, are given herewith :—

Number of	Beasts.	Calves.	Pigs.	Total.
Carcases (including offal)	58	3	28	89
Portions of carcases (quarters)	13	—	—	13
Heads (including tongues)	303	—	519	822
Lungs	965	—	580	1545
Livers	368	—	561	929
Tripes or stomachs	254	—	—	254
Spleens	162	—	74	236
Kidneys	80	—	—	80
Hearts	6	—	2	8
Udders	60	—	—	60
Mesenteries	349	—	1497	1846

Under the Tuberculosis Order, 5 cows were taken to the Public Slaughterhouse for slaughter from the West Riding, 1 of which was entirely condemned ; and 8 were slaughtered for the County Borough, 5 being entirely condemned. These are included in the foregoing table.

The following table gives an analysis of whole carcasses condemned on account of disease or condition other than tuberculosis :—

Condition or disease which rendered the meat unfit for human food.	Beasts.	Calves.	Sheep.	Pigs.	Total.
Septicaemia	1	—	—	—	1
Pyæmia	—	—	—	1	1
Swine fever	—	—	—	6	6
Jaundice	—	—	—	10	10
Johne's disease and hydraemia ...	7	—	—	—	7
Nephritis and hydraemia	3	1	—	—	4
Traumatism and hydraemia	2	—	—	—	2
Hydraemia	9	3	210	12	234
Joint ill	—	1	—	—	1
Immature	—	2	—	—	2
Killed in extremis	—	1	6	1	8
Swine erysipelas	—	—	—	6	6
Malignant tumour	—	—	—	1	1
Leukæmia	—	—	2	—	2
Fevered	—	—	—	2	2
	22	8	218	39	287

The practice of marking meat, in accordance with Part III of the Public Health (Meat) Regulations, was continued throughout the year. The stamp, which identifies the inspector using it, indicates that the carcass has been inspected and passed as fit for human food, and is used only in connection with carcasses dressed at the Public Slaughterhouse. Pigs, to the number of 2,288 were marked during the year.

The Borough continues to be free from butcher meat stalls, except meat hawkers' vehicles. None of these were found to contravene the Public Health (Meat) Regulations.

OTHER FOOD.

The following table gives details of food other than fresh killed meat condemned during the year :—

	Number	Weight
Frozen or chilled meat	—	613 lbs.
Fish	—	14 lbs.
Prawns (tin)	1	—
Winkles (bag)	1	—
Tinned food (tins)	47	—

Fourteen certificates of unsoundness were given.

Special examinations were made of 1494 carcasses of imported mutton for caseous lymphadenitis, all of which were found to be free from the disease.

FOOD AND DRUGS (ADULTERATION) ACT.

Of 212 samples of foods and drugs analysed 14 (6.60 per cent.) were not reported genuine ; the non-genuine samples comprised sausages, potted meat, and milk.

Three informal samples of sausages contained small quantities of prohibited boron preservative ; enquiries showed that two vendors had still on hand from some time prior to the date of prohibition a little boron preservative and, in one of these cases, pepper, to be used in sausage making, had been placed in the receptacle containing some preservative ; though no definite findings resulted from enquiries relating to the other two samples, it is probable some similar carelessness was responsible for the presence of the preservative ; all vendors were warned.

One vendor of potted meat was warned respecting the presence of starch in his product.

Ten samples of milk (derived from eight supplies) did not conform to the requirements of the Sale of Milk Regulations. Proceedings were taken against two vendors, each summons being dismissed on payment of costs. The enquiries and " follow up " samples showed that unequal intervals between milking times, faulty bulking, failure to keep the milk " plunged " during delivery, or a combination of these, were the factors responsible for milk-fat deficiency in all samples adversely reported on regarding that constituent. Producers are constantly being advised to observe as nearly equal intervals as possible between milkings and to mix the yield of the herd before despatch from the farm ; and the necessity for the use of plungers during delivery is constantly being urged upon retailers.

Four " appeal-to-the-cow " samples (relating to two supplies) were taken ; one sample was deficient in milk-fat due to the milking times and method of bulking.

In connection with the supply of milk to schools 17 samples were submitted for analysis ; one was slightly deficient in milk-fat and the remaining samples were genuine.

All samples of cream were genuine and free from preservatives and the samples of condensed milk conformed to the requirements of the Public Health (Condensed Milk) Regulations.

With regard to the Public Health (Preservatives, Etc., in Food) Regulations, four samples were found to contain preservative ; these were sausages and comment has already been made on three of these samples ; the fourth contained sulphur di-oxide—a permitted preservative provided its presence is declared ; in this case a declaration was given by the vendor.

Details of the samples examined are as follow :—

Total No.	Nature of sample.	Genuine		Not reported as genuine.		Formal samples			Penalties including costs.
		Formal.	Informal.	Formal.	Informal.	Prosecutions instituted.	Dismissed or withdrawn.	Convictions.	
2	Ammoniated tincture of quinine ...	—	2	—	—	—	—	—	—
3	Baking powder ...	—	3	—	—	—	—	—	—
24	Butter ...	—	24	—	—	—	—	—	—
2	Camphorated oil ...	—	2	—	—	—	—	—	—
3	Coffee ...	—	3	—	—	—	—	—	—
1	Coffee and chicory	—	1	—	—	—	—	—	—
6	Condensed milk ...	—	6	—	—	—	—	—	—
6	Cream ...	—	6	—	—	—	—	—	—
2	Cream of tartar ...	—	2	—	—	—	—	—	—
3	Flour (self-raising)	—	3	—	—	—	—	—	—
2	Glycerine ...	—	2	—	—	—	—	—	—
3	Ground almonds ...	—	3	—	—	—	—	—	—
3	Ground ginger ...	—	3	—	—	—	—	—	—
3	Jams ...	—	3	—	—	—	—	—	—
6	Lard ...	—	6	—	—	—	—	—	—
2	Liquorice powder ...	—	2	—	—	—	—	—	—
6	Margarine ...	—	6	—	—	—	—	—	—
118	Milk ...	86	22	7	3	2	2	—	£1 14s. 0d.
3	Pepper ...	—	3	—	—	—	—	—	—
2	Potted meats ...	—	1	—	1	—	—	—	—
4	Sausages ...	—	1	—	3	—	—	—	—
3	Sponge buns ...	—	3	—	—	—	—	—	—
2	Sweet spirit of nitre	—	2	—	—	—	—	—	—
3	Vinegar ...	1	2	—	—	—	—	—	—
212		87	111	7	7	2	2	—	£1 14s. 0d.

Further details of the samples not reported genuine are as follow:—

Identi- fication mark.	Article.	Result of analysis. Percentages.		Remarks and action taken.
		Milk fat.	Solids not fat.	
870	Milk	2.30	8.82	Summons issued against vendor, dismissed on payment of costs.
882	Milk	3.30	8.40	Letter to vendor.
886	Milk	3.65	8.46	Letter to vendor.
896	Milk	2.70	8.65	Deficiency of milk fat due to milking hours and faulty bulking; letter to producer-retailer.
900	Milk	2.46	8.70	“ Appeal-to-cow ” sample in connection with No. 896 ; mixed yield of five cows with fore-milk of a sixth ; morning milk ; deficiency of milk fat due to milking hours and faulty bulking.
909	Milk	2.82	8.90	Summons issued against vendor, dismissed on payment of costs.
910	Milk	2.93	8.77	Deficiency of milk fat due to milking hours ; letter to producer-retailer.
928	Milk	2.78	8.90	Deficiency of milk fat due to milking hours ; letter to vendor.
935	Milk	2.49	9.23	Place of delivery sample ; relates to No. 928 ; milk fat deficiency due to milking hours and faulty bulking ; letter to producer.
979	Milk	2.85	8.76	Milk fat deficiency due to milking hours and faulty bulking ; letter to producer-retailer.
1037	Potted meat	Contained 1.5 per cent. anhydrous starch		Letter to vendor (maker).
1039	Sausages	Contained a boron preservative in the proportion of 0.07 per cent. when expressed as boric acid ; equivalent to 4.9 grains per lb.		Letter to vendor.
1040	Sausages	Contained a boron preservative in the proportion of 0.3 per cent. when expressed as boric acid ; equivalent to 21 grains per lb.		Letter to vendor.
1042	Sausages	Contained a boron preservative in the proportion of 0.03 per cent. when expressed as boric acid ; equivalent to 2.1 grains per lb.		Letter to vendor.

The quarterly average composition of the samples of milk was as follows :—

Period.	Percentages.		No. of samples.
	Solids not fat.	Milk-fat.	
1st quarter	3.44	8 .84	38
2nd quarter	3.52	8 .86	39
3rd quarter	3.75	8.88	19
4th quarter	3.64	8.91	22
The whole year	3.56	8.87	118

The total number of milk samples procured was	...	...	...	...	118
The highest percentage of milk fat was	...	...	...	...	6.05
Associated with solids not fat (April)	...	...	...	...	8.60
The highest percentage of solids not fat was	...	...	...	...	9.35
Associated with milk fat (April)	...	...	...	...	3.60
The number of samples containing 4 per cent. or over of milk fat was	...	...	...	...	15
The number of samples containing 9 per cent. or over of solids not fat was	...	...	...	...	33
And the number of samples containing over 4 per cent. milk fat and 9 per cent. solids not fat was	...	...	...	...	2

SECTION VI.

INFECTIOUS DISEASES GENERALLY.

The prevalence of the infectious diseases notifiable in the County Borough is shown in the following table:—

Disease.						1928	1929	1930	1931	1932
Small-pox ...	...	...	...	...	...	31	2	2	—	—
Cholera ...	...	...	...	...	...	—	—	—	—	—
Plague ...	...	...	...	...	...	—	—	—	—	—
Diphtheria ...	...	...	...	...	...	70	74	146	188	104
Erysipelas...	...	...	...	...	...	55	63	38	33	42
Scarlet fever ...	...	...	...	...	...	177	217	200	119	114
Malaria ...	...	...	...	...	...	1	1	1	1	—
Typhoid and paratyphoid fevers ...	...	...	...	...	...	1	3	3	7	15
Continued fevers ...	...	...	...	...	...	—	—	—	—	—
Puerperal fever ...	...	...	...	...	...	6	6	7	4	6
Encephalitis lethargica ...	...	...	...	...	...	4	—	2	2	1
Measles and German measles ...	...	...	...	...	...	464	618	1712	392	1464
Ophthalmia neonatorum ...	...	...	...	...	...	6	5	1	7	6
Pulmonary tuberculosis ...	...	...	...	...	...	143	141	98	103	100
Other forms of tuberculosis ...	...	...	...	...	...	34	38	44	39	40
Cerebro-spinal meningitis ...	...	...	...	...	...	1	—	3	52	13
Pneumonia ...	...	...	...	...	...	266	317	196	172	155
Chicken-pox ...	...	...	...	...	...	419	387	492	325	444
Dysentery...	...	...	...	...	...	—	—	—	—	—
Acute anterior poliomyelitis ...	...	...	...	...	...	1	—	—	—	—
Acute polio-encephalitis...	...	...	...	...	...	—	—	—	—	—
Puerperal pyrexia ...	...	...	...	...	...	8	16	11	13	10
Pemphigus neonatorum ...	...	...	...	...	...	4	4	5	2	1
Totals ...	...	...	...	...	...	1691	1892	2961	1459	2515

In the subsequent table particulars are given of the incidence of the notifiable infectious diseases during the year, showing age grouping, ward distribution, cases removed to hospital, and total deaths.

Notifiable disease.	No. of cases notified											Total cases notified in each ward of the Borough.								Total cases removed to hospital.	Total deaths.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
	At ages—years.											East.	St. Ann's.	Clifton.	South.	West.	North.	Thornhill.	Masbro'.			Kimberworth.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
	Under 1 year.	1 to 2 years.	2 to 3 years.	3 to 4 years.	4 to 5 years.	5 to 10 years.	10 to 15 years.	15 to 20 years.	20 to 35 years.	35 to 45 years.	45 to 65 years.												65 years and over.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
Small-pox</

ISOLATION HOSPITAL.

The cases of diphtheria and scarlet fever met with during the year were generally mild, running a benign course and giving rise to very few serious complications.

The following table shows the numbers of cases of the principal notifiable diseases admitted during the year.

Disease.	Cases notified during 1932	In hospital 31st Dec. 1931	Admissions 1932	Discharges 1932	Deaths 1932	Remaining in hospital 31st Dec. 1932	Total patient days.
Scarlet fever ...	114	10	98	91	—	17	2790
Diphtheria ...	104	13	100	104	5	4	4658
Typhoid fevers ...	15	7	21	26	2	—	1147
Cerebro-spinal meningitis ...	13	—	24	10	13	1	531
Other diseases ...	—	—	10	8	2	—	124
Total ...	246	30	253	239	22	22	9250

The average number of patients daily was 25.3

Of the 114 cases of scarlet fever notified, 95 were removed to hospital, the remaining 19 being treated at home. In addition 2 extra-urban cases and one member of the Isolation Hospital staff were admitted, making a total of 98 cases given in-patient treatment. In 5 of these cases the diagnosis was not confirmed ; 3 were suffering from measles, and 2 from tonsillitis. Two cases admitted as scarlet fever were found to be suffering from scarlet fever and diphtheria, and two other cases were found to have measles as well as scarlet fever.

The commonest complication met with was cervical adenitis, usually of slight degree ; but two cases of rather severe suppuration occurred, one following cervical adenitis and the other axillary adenitis. Bronchitis was met with in 4 cases, impetigo in 2 cases, and albuminuria and tonsillitis each occurred in one case. One case had a relapse.

104 notifications of diphtheria were received of which 98 cases were treated in hospital. 2 admissions from the staff of the hospital brought the total number of cases treated to 100. One of these cases was found to be suffering from tonsillitis and one from stomatitis, while 2 were suffering from scarlet fever as well as diphtheria.

10 cases were suffering from laryngeal involvement, and five of these required tracheotomy. One of the cases operated on died.

No serious complications were met with. Cardiac irregularity occurred in 5 cases in the course of their treatment, and one case developed a tachycardia. Otorrhoea occurred in two cases and albuminuria in two cases. One case developed a strabismus, one had a transient palatal paralysis, and another had a transient

weakness of the muscles of one leg causing drop-foot. Acute tonsillitis occurred in two cases, glossitis in one case, and orchitis, a rare complication, in one case.

21 cases were admitted to hospital as definite or suspected cases of typhoid or paratyphoid fever. In 15 cases the diagnosis was confirmed. The diagnosis in the remaining cases were pyaemia, influenza, pneumonia, gastritis (2), enteritis, and food poisoning.

Of the 15 accepted cases, 7 proved to be due to *b. typhosus*. 5 of these cases were included in the special report incorporated with my annual report of 1931, which dealt with an outbreak of typhoid fever occurring in December, 1931 and January 1932.

The other two cases were sporadic and unconnected with any known outbreak.

The remaining 8 cases were due to the *b. paratyphosus B*. Seven of these were admitted from Alma Road Hospital, the source of this outbreak being (apparently) extra-urban. One case was admitted to the Isolation Hospital 15 days after discharge following treatment for scarlet fever. The infection in this case probably occurred from another case in the hospital.

The case of pyaemia was interesting. A post-mortem examination was made as a claim for compensation appeared likely. The man had received a cut on the hand while at work and this had suppurated. At the post-mortem examination the abdominal cavity was found to be filled with faeces, while the whole of the caecum and part of the ascending colon had sloughed away. A large perforation about 3" × 2" was present in the descending colon. These lesions had followed the depositions of infective emboli from the hand wound. Further embolic abscesses were found in the lungs.

The case of food-poisoning was also interesting as the causal organism was of rather an uncommon type. Specimens of blood, faeces, and vomit were sent to the Ministry of Health for examination, the result of which proved the offending organism to be one of the *Salmonella* group—type Newport. Enquiries pointed to the source of infection as beef-stew which was shared by the patient and his fellow-lodger. Part of this stew formed the men's supper, the remainder being stored overnight in a cupboard and used for dinner the following day. As it seemed tainted, only a portion of it was consumed, and the rest thrown away, so that none was available for examination. Both men were taken ill the following day, but the fellow-lodger quickly recovered. It was thought that the stew had been contaminated by mice during the night it was stored in the cupboard..

The cases of cerebro-spinal meningitis are discussed in greater detail below.

The remaining 10 cases included in the foregoing table as "other diseases" consisted of:—

Tonsillitis	...	...	...	...	...	...	...	2
Erysipelas	...	...	...	...	...	...	...	1
Pneumonia	...	...	...	...	...	...	...	1
Measles	...	...	...	...	...	...	...	1
Measles and pneumonia	...	...	...	...	...	...	...	2
Diphtheria contacts for observation	...	...	...	...	...	...	...	2
Tb. lungs and larynx	...	...	...	...	...	...	...	1

The case of tuberculosis of the lungs and larynx was admitted from Oakwood Hall Sanatorium. The disease was very advanced and the prognosis practically hopeless. Oedema of the larynx occurred and the case was removed to the Isolation Hospital where tracheotomy was performed in an attempt to prolong life, but the patient survived the operation only a few hours.

The two diphtheria contacts were brothers. Adequate supervision could not be carried out at home and they were removed to hospital where they were given a prophylactic dose of serum and discharged after 4 days.

Comparative annual case figures are given in the following summary :—

Year.	Scarlet fever.	Diphtheria.	Typhoid fevers.	Other diseases.	Total.
1928 ...	144	68	1	11	224
1929 ...	218	69	2	13	302
1930 ...	172	138	3	22	335
1931 ...	109	188	8	66	371
1932 ...	98	100	21	34	253
Total ...	741	563	35	146	1485

The accommodation and nature of the present buildings comprising the treatment blocks at the Isolation Hospital are old-fashioned and inadequate. An observation block built on the cubicle system would greatly facilitate the nursing of cases of those diseases which usually occur in small numbers, e.g. typhoid, erysipelas, cerebro-spinal fever, and also cases admitted for observation, etc. It would also minimise the risk of cross-infection occurring in the wards through cases being admitted suffering from or incubating a second disease, or being wrongly diagnosed. Attention is drawn to the frequency with which measles was met with last year and to the high infectivity and mortality of this disease. 3 cases were admitted as observation cases and 3 were admitted as cases of scarlet fever. Two cases of scarlet fever were suffering from measles on admission, and two cases were incubating measles on admission, the measles developing during the course of treatment. Each of these 10 cases might well have been the source of an epidemic of measles in the scarlet fever ward. Four cases were admitted either to the scarlet fever or diphtheria wards before it was discovered that they were suffering from both diseases. Two cases of diphtheria developed scarlet fever during treatment. The difficulties met with and the risks run are thus apparent. Under the present system cases are admitted to the wards, previous isolation and observation being impossible. The patients are thus unavoidably exposed at times to such cases of "wrong diagnosis" and "mixed infection" as may be admitted.

The cubicle system would also effect an economy of nursing and domestic staff, especially when, as frequently happens, small numbers of cases of different diseases are being treated, e.g. typhoid, erysipelas, measles, cerebro-spinal meningitis, etc. These cases could with safety be nursed in the observation block.

CEREBRO-SPINAL FEVER.

Fortunately neither in numbers nor in virulence did the cases of this disease met with in 1932 approach the severity of the epidemic of 1931.

24 patients were admitted to the Isolation Hospital as suspected cases, but in only 14 of these was the diagnosis of cerebro-spinal meningitis confirmed. The diagnosis arrived at in the other 10 cases, with results of treatment, are shown below.

Patient.	Age.	Diagnosis.	Result of treatment.
M.C.	2	Pneumococcal meningitis	Died after 2 days in hospital.
W.S.	4/12	" "	" 4 " "
R.B.	11	" "	" 1 " "
E.H.	56	Sub-arachnoid haemorrhage	Transferred after 11 days.
F.S.	55	" " "	" " 4 "
S.D.	29	Uraemia ; chronic nephritis	Died after 1 day in hospital.
R.S.	7	Lobar pneumonia	Recovered.
H.B.	21	Septicaemia	Died after 1 day in hospital.
A.R.	17	Syphilitic meningitis	Transferred after 9 days.
* A.S.	32	Streptococcal meningitis	Died after 5 days in hospital.

* This was an extra-urban case.

The two cases of sub-arachnoid haemorrhage were transferred to the General Hospital, and the case of syphilitic meningitis was transferred to the Alma Road Hospital.

The seasonal incidence differed from the 1931 outbreak in that the greatest number of cases occurred in the first quarter of the year, whereas in the 1931 outbreak, the " peak " was not reached until April and May.

In connection with the diagnosis of cerebro-spinal meningitis it is gratifying to record the co-operation which existed between the general practitioners of the town and the Public Health Department. Consultations regarding suspected cases were requested and granted in 7 cases.

Of the 14 cases accepted as cerebro-spinal fever, the diagnosis was clinched by the isolation and cultivation of the causal meningococcus in 8 cases. The types of organism met with were ; type 3 in five cases, type 1 in two cases, and type 2 in one case. In three other cases the diagnosis was made practically certain by the finding of Gram-negative diplococci in a smear of the spinal fluid. In the remaining three cases the diagnosis was provisional only, resting on clinical grounds including the finding of turbid fluid on lumbar puncture and the confirmation by the laboratory of a polymorphonuclear exudate.

Petechiae were not a prominent feature although they occurred in some form in 8 cases. In most cases they consisted of a few punctuate spots on the arms or legs, and in one case (T.S.) a sub-conjunctival haemorrhage was the only evidence of a purpuric tendency. In no case was the purpura marked.

In the sphere of treatment lumbar puncture and withdrawal of fluid until the flow has almost ceased was performed daily in the acute stage and thereafter at increasing intervals until the fluid became quite normal. Antimeningococcal serum was injected intrathecally during the acute stage in amounts varying from $\frac{1}{4}$ to $\frac{1}{2}$ the amount of cerebro-spinal fluid withdrawn. For this purpose the concentrated antiserum as prepared by the Lister Institute was found to be of great value. Ten c.cs. of this serum (antibacteriolytic for types 1 and 3—the prevalent types of meningococci) are equivalent to 30 c.cs. of the unconcentrated serum, hence a large dose of serum can be given in moderate bulk. In practice more than 20 c.cs. of Lister serum was never injected intrathecally as it was deemed advisable to keep the intracerebral pressure as low as possible. The practice of giving a general anaesthetic for routine lumbar puncture was discontinued early in the year and only used later for nervous or restless patients. General anaesthesia has the advantage of increasing the intracranial pressure thus allowing a greater amount of fluid to be withdrawn, but bronchitis readily develops in those who have daily anaesthetics and this is a complication best avoided. The patient requires all his resistance to combat the meningococcal infection and must not be exposed to the risk of a super-added infection. By using local anaesthesia the operation of lumbar puncture can be practically painless.

Antiserum was given by either the intramuscular or intravenous routes daily during the acute stage, the former route being most commonly used. Both the concentrated (types 1 and 3) and the unconcentrated sera were used, preference being given in the latter part of the year to the concentrated product. In terms of unconcentrated serum (i.e. reckoning 10 c.cs. of Lister serum as equalling 30 c.cs.) the largest amount of serum given was 1080 c.cs. (M.J.) and the average amount of serum given to the cases who recovered was 580 c.cs.

The method of autoinoculation by injecting some of the patient's own cerebro-spinal fluid intramuscularly was tried in all cases which occurred after 12/2/32. No previous sterilisation of this fluid was performed, and in no single case was there the slightest suggestion of any unpleasant reaction, either local or general. The results which followed the adoption of this method were certainly encouraging. With so few cases one cannot with justice say more, but the method certainly warrants further trial. The case of G.B. was very dramatic. He was admitted on the third day of illness in a semi-comatose condition. During the first night in hospital he became unconscious and lost control of his sphincters. His treatment included the giving of 40 c.cs. of Lister's and 500 c.cs. of unconcentrated serum. He received $6\frac{1}{2}$ c.cs. of his own cerebro-spinal fluid in 5 injections and 19 lumbar punctures were performed. Improvement was noted from the third day of treatment, the cerebro-spinal fluid becoming less turbid until the 16th day when it became more turbid, and the meningeal symptoms recurred. He was given a further dose of his own fluid (the injections of which had been stopped after the 4th day) and convalescence was thereafter uninterrupted.

The case of G.W. is also suggestive of this method being of value. His case was intended to be used as a control, and for the first seven days he received no autoinoculations but was treated with concentrated serum in the ordinary way. At the end of this time he was only very slightly improved. There was still marked nuchal rigidity, he was febrile, and cerebro-spinal fluid showed a medium turbidity. Serum treatment was stopped and three injections of his own fluid were given on the 8th, 9th and 10th days. The temperature became normal on the 9th day and remained so. No nuchal rigidity existed from the 9th day onwards and his fluid became clear on the 10th day. Thereafter convalescence was uninterrupted.

Most of the injections of patients' own fluid consisted of 1—2 c.cs. intramuscularly for about 4 days, but J.A. who also recovered completely received much larger doses, 35 c.cs. being given in two doses.

With the exception of J.H. who suffered from deafness and much stiffness of muscles after her recovery those cases who recovered did so completely.

Seven deaths occurred, the mortality being therefore 50 per cent. One child (J.T.) was admitted with acute bronchitis complicating the meningeal infection and died within a few hours of admission. This death is therefore omitted from the following figures as having no bearing on the results of treatment.

In the "certain" and "probable" cases (i.e. those in whom the diagnosis was proved by growth of the organism, and those in whom Gram-negative diplococci were seen in the smear) the mortality was 40 per cent., while in the "certain" cases alone the figure was 43 per cent. In the 10 cases which received treatment by autoinoculation of their fluid the mortality falls to 30 per cent. and if we exclude two of those cases in whom the diagnosis was only provisional the figure is 25 per cent.

The three cases who received no autoinoculation all died (A.W.) (D.R.) and (W.A.).

It is, of course, realised that these figures relating as they do to such a small series of cases are of no practical value in assessing the value of the method adopted, but they are given as a matter of interest and for comparison with any further figures.

The mortality figures would be very greatly improved also, by the exclusion of Mrs. B. who died of pyelitis and uraemia after recovering from the cerebro-spinal fever. She had a chronic cystitis on admission and gave a long history of urinary trouble. Her cerebro-spinal fluid became practically clear after the 26th day. Her urinary condition however became aggravated and eventually caused her death after 52 days in hospital.

A table giving some details of the accepted cases is appended :—

Case.	Age	Day of disease when admitted	Diagnosis.	Type of organism.	Petechniae.	Total serum.		Total equivalent serum.	No. of lumbar punctures.	No. of C.P., F.P. or V.P.	Own fluid given (c.cs.)	Result.
						Lister.	Polyvalent.					
A.W.	8	2nd	Culture	3	—	90 c.cs.	275 c.cs.	545 c.cs.	8	1	—	Died 4th day.
D.R.	15/12	1st	Provisional	—	X	60 c.cs.	125 c.cs.	305 c.cs.	4	3	—	Died 5th day.
W.A.	38	3rd-4th	Microscopic.	—	—	40 c.cs.	380 c.cs.	500 c.cs.	4	—	—	Died 4th day.
J.H.	9	5th	Provisional	—	—	—	255 c.cs.	255 c.cs.	10	—	2½	Recovery : deafness.
J.T.	5	2nd	Culture	3	X	—	76 c.cs.	76 c.cs.	1	—	1	Died same day.
G.B.	19	3rd	Culture	3	X	40 c.cs.	500 c.cs.	620 c.cs.	19	—	6½	Complete recovery.
I.M.	18	3rd	Microscopic	—	X	90 c.cs.	375 c.cs.	645 c.cs.	15	—	6	Complete recovery.
Mrs. B.	55	3rd	Culture	1	X	205 c.cs.	425 c.cs.	1040 c.cs.	26	—	7	Died : pyelitis.
C.L.	8	2nd	Provisional	—	X	235 c.cs.	—	705 c.cs.	7	1	7	Died 9th day.
M.J.	18	2nd	Culture	3	X	360 c.cs.	—	1080 c.cs.	14	—	7	Complete recovery.
T.S.	6/12	5th	Culture	2	X	60 c.cs.	—	180 c.cs.	5	4	0·2	Died 9th day.
G.W.	31	? 14th	Microscopic	—	—	170 c.cs.	—	510 c.cs.	14	—	4	Complete recovery.
J.A.	4	7th	Culture	3	—	176 c.cs.	—	528 c.cs.	6	—	35	Complete recovery.
J.P.	26	4th	Culture	1	—	130 c.cs.	—	420 c.cs.	15	—	67½	Complete recovery.

KIMBERWORTH HOSPITAL.

No cases of small-pox were admitted to Kimberworth Hospital during the year.

VACCINATION.

The County Borough is divided into two areas for the purpose of vaccination, the south-east, and the north-west, each with a vaccination officer and a public vaccinator.

Dr. T. V. Griffith, the Medical Officer of Alma Road Hospital, also acts as a public vaccinator.

The following are details extracted from the annual return forwarded to the Registrar-General, and relate to the year 1931 :—

Number of live births returned in birth list sheets	...	...	...	1348
Number successfully vaccinated	...	...	...	592
Number insusceptible of vaccination	...	...	...	17
Number of conscientious objectors	...	...	...	636
Number who died unvaccinated	...	...	...	80
Number postponed by medical certificate	...	...	...	4
Number removed to other known districts	...	...	...	17
Number removed to places unknown	...	...	...	2
Number remaining on 31st January, 1933, not accounted for	...	...	...	—

Under the Public Health (Small-pox Prevention) Regulations, 1917, no vaccinations or revaccinations were performed.

PROPHYLAXIS OF DIPHTHERIA AND SCARLET FEVER.

During the year no Schick or Dick tests were performed, nor were any persons immunised.

SUPPLY OF DIPHTHERIA ANTITOXIN.

On application to the Health Department, concentrated diphtheria antitoxin is supplied free to all medical practitioners for use in the Borough.

During the year, 20 phials, equivalent to 128,000 units, were so supplied.

BACTERIOLOGICAL LABORATORY.

In the following table details are given of the examinations at the Public Health Laboratory made during 1932 :—

Examinations for :—	Positive.	Negative.	Doubtful.	Total.
Diphtheria	190	897	—	1087
Tuberculosis	222	1176	1	1399
Typhoid fever	—	5	—	5
Gonorrhoea	136	132	45	313
Other examinations	62	48	—	110
Total	610	2258	46	2914

The following statement gives details of the specimens examined at the Bacteriological Laboratory of the University of Sheffield during the year 1932 :—

Wassermans	...	...	...	...	...	...	...	...	...	354
Spirochaetes	...	...	...	...	...	...	...	...	...	1
Gonococci	...	...	...	...	...	...	...	...	...	1
Cerebro-spinal fluid :										
Complete examinations	...	...	...	...	...	...	...	...	...	4
„ less colloidal gold	...	...	...	...	...	...	...	...	...	28
Examination for organisms	...	...	...	...	...	...	...	...	...	3
Typing meningococcus	...	...	...	...	...	...	...	...	...	5
									—	40
Blood cultures	...	...	...	...	...	...	...	...	...	7
Typhoid examinations :										
Blood	...	...	...	...	...	...	...	...	...	32
Urine	...	...	...	...	...	...	...	...	...	72
Faeces	...	...	...	...	...	...	...	...	...	64
									—	168
Virulence tests :										
Nasal swabs	...	...	...	...	...	...	...	...	...	1
Milk examinations :										
Inoculation—T.B.	...	...	...	...	...	...	...	...	...	73
B. coli content	...	...	...	...	...	...	...	...	...	102
Bacterial count	...	...	...	...	...	...	...	...	...	5
									—	180
Other examinations :										
Haemolytic streptococci	...	...	...	...	...	...	...	...	...	15
Water for bacteriological examination	...	...	...	...	...	...	...	...	...	4
Nasal swabs—organisms	...	...	...	...	...	...	...	...	...	2
Pieces of skin—tetanus	...	...	...	...	...	...	...	...	...	2
Portion of spleen	...	...	...	...	...	...	...	...	...	1
Portion of mesenteric gland	...	...	...	...	...	...	...	...	...	1
Portion of lung	...	...	...	...	...	...	...	...	...	1
Pus—organisms	...	...	...	...	...	...	...	...	...	1
									—	27
										<u>779</u>

NON-NOTIFIABLE ACUTE INFECTIOUS DISEASES.

The following table indicates the incidence of various non-notifiable acute infectious diseases prevalent amongst children attending the public elementary schools :—

Disease.	1928	1929	1930	1931	1932
Whooping cough	173	580	302	461	640
Mumps	877	148	202	419	124
Ringworm	547	242	264	290	212
Totals	1597	970	768	1170	976

CANCER.

During the year, 86 deaths from cancer took place, as compared with 71 in 1928, 91 in 1929, 88 in 1930. and 84 in 1931.

Details are furnished in the following table regarding the location of the disease, together with the age and sex distribution.

Location of disease	Under 20 years M. F.	20—25 years	25—30 years	30—35 years	35—40 years	40—45 years	45—50 years	50—55 years	55—60 years	60—65 years	65—70 years	70—75 years	75—80 years	80—85 years	85 years & over	Total M. F.	Grand total.
		M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.		
Buccal cavity and pharynx	M.	-	-	-	-	-	1	1	3	1	-	-	-	-	-	7	9
	F.	-	-	-	-	1	-	-	1	-	-	-	-	-	-	2	
Digestive organs and peritoneum	M.	-	1	-	-	1	1	5	2	5	6	2	5	-	-	27	40
	F.	-	-	-	1	2	-	2	2	1	-	-	1	-	-	13	
Respiratory organs	M.	-	-	-	-	1	-	-	-	-	-	-	-	-	-	2	3
	F.	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	
Uterus	F.	-	-	-	-	1	-	3	2	3	2	1	-	1	-	13	13
Female genital organs	F.	-	-	-	-	-	-	2	-	-	2	-	-	-	-	4	4
Breast	F.	-	-	-	-	-	-	2	1	1	-	-	-	-	-	4	4
Male genito-urinary organs	M.	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	1
Skin	M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Other organs	M.	-	-	1	-	-	-	-	1	1	2	-	-	-	-	8	12
	F.	-	1	-	-	-	-	-	1	1	-	-	-	-	-	4	
Totals	...	-	1	1	1	2	2	2	4	2	7	9	5	5	8	45	86

The ratio of cancer deaths to deaths from all causes expressed as a percentage for the years 1928-32 is as follows :—
In 1928 the percentage was 9.5 ; in 1929, 10.6, ; in 1930, 11.9 ; in 1931, 10.0, and 11.0 in 1932

INFLUENZA.

During the year 17 deaths occurred from influenza : 2 in January, 5 in February, 4 in March, and one each in April, May, July, October, November, and December.

CLEANSING AND DISINFECTION.

The arrangements for cleansing and disinfection, as outlined in my annual report for 1931, remain unchanged.

REMOVAL OF INFIRM OR DISEASED PERSONS.

Under Section 101 of the Rotherham Corporation Act, 1928, which enables the medical officer of health to apply to a court for an order for removal of an infirm or diseased person, two applications were made during the year. Orders were granted and the persons ultimately removed to the Institution of the Public Assistance Committee.

The other person was under observation and was ultimately persuaded to enter the institution without an order being made.

VERMINOUS CONDITIONS.

During 1932, a total of 30,226 examinations of school children were made by school nurses, as a result of which 315 individual children were found unclean, 16 of this number being cleansed under arrangements made by the Local Education Authority.

RATS.

Rat Week was observed in Rotherham in accordance with the instructions of the Ministry of Agriculture and Fisheries from the 7th to the 12th November, 1932.

The attention of the public was drawn to Rat Week by notices in the press and also by special Rat Week bills which were posted throughout the town on notice boards, in shops, libraries, and public buildings, etc. Copies of the bills were also sent to the local Goods Managers of the L.M.S. and L.N.E. Railway Companies, as well as to the Markets Department of the Corporation.

Specially worded lantern slides were prepared by the Health Department and were sent to each of the seven local cinemas for exhibition during their programmes.

As in previous years, all hardware dealers for traps, etc., and chemists for poisons were circulated in advance of the week and were asked to show the Rat Week bills and to make a special window display during the week.

The attention of the Borough Engineer was directed to sewers and tips in the area and he reported as follows :—

“ As the position of the Sewage Works is located on the banks of the River Don in a somewhat isolated position no special measures have been found necessary to cope with the rat problem. The works are very free from them, but it is not possible entirely to clear the works as more rats would be constantly coming in via the river.

Refuse tipping is carried out by controlled tipping in layers chiefly in filling up low areas. The total depth of tips is not great, and all refuse is covered over each day. By this means no definite trouble has been experienced with rats.

The sewers are very free from rats ; this being mainly due to the regular flushing of all sewers likely to leave deposit and the regular inspection of the sewers generally. Rats will always get into the sewers from the river as there are various points where storm overflows discharge into the river by means of which rats get into the sewers, but do not appear to stay there.”

The information available at the Public Health Department included the abridged reprint of the Ministry's Bulletin No. 30. This year no ratcatchers were employed but the addresses of those acting in a private capacity were given to those applicants for assistance who required their services. It is regrettable that few applications for assistance were made.

MOSQUITOES.

The year 1932 was fortunately one in which mosquitoes were not so troublesome as previously although several instances of severe illness were brought to notice. Specimens caught in the Borough and examined were found to be the common house mosquito (*Culex pipiens*).

SECTION VII.

TUBERCULOSIS.

NEW CASES AND MORTALITY DURING 1932.

Under the Public Health (Tuberculosis) Regulations, 1930, the number of cases of tuberculosis on the register of notifications on the 31st December, 1932, was 1111, classified as follows :—

Total cases ...	Pulmonary.			Non-pulmonary.		
	Males.	Females.	Total.	Males.	Females.	Total.
1111	480	408	888	117	106	223

Particulars of new cases of tuberculosis and of deaths from the disease are given in the following table :—

Age periods. Years.			New cases.*				Deaths.			
			Pulmonary		Non-pulmonary		Pulmonary		Non-pulmonary	
			M.	F.	M.	F.	M.	F.	M.	F.
Under 1	...	...	—	—	—	—	—	—	—	—
1-5	...	...	—	4	5	5	—	2	1	—
5-10	...	...	5	5	7	3	—	—	1	—
10-15	...	...	7	6	4	2	—	1	—	—
15-20	...	...	7	9	—	2	—	—	1	—
20-25	...	...	8	11	4	4	3	9	1	1
25-35	...	...	6	9	1	1	8	4	—	—
35-45	...	...	12	5	1	2	7	2	—	3
45-55	...	...	—	—	—	1	7	—	—	—
55-65	...	...	12	1	1	—	4	1	1	—
65 and upwards	...	...	—	—	—	—	2	—	—	—
Totals	...	...	65	50	23	20	31	19	5	4

*Primary notifications, including other new cases which have come to the knowledge of the Medical Officer of Health during the year 1932.

The ratio of non-notified tuberculosis deaths to the total tuberculosis deaths was 1 in 10. No action was required for cases of wilful neglect or refusal to notify.

No action was taken during the year under the Public Health (Prevention of Tuberculosis) Regulations, 1925, or Section, 62 of the Public Health Act, 1925.

TUBERCULOSIS DISPENSARY.

The following return shows the work of the dispensary during the year 1932.

DIAGNOSIS.	Pulmonary				Non-pulmonary				Total				Grand total.	
	Adlts.		Child.		Adlts.		Child.		Adlts.		Child.			
	M	F	M	F	M	F	M	F	M	F	M	F		
A—New cases examined during the year (excluding contacts)														
(a) Definitely tuberculous ...	38	26	5	8	1	4	12	7	39	30	17	15	101	
(b) Diagnosis not completed...	—	—	—	—	—	—	—	—	4	3	1	1	9	
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	28	25	8	12	73	
B—Contacts examined during the year :—														
(a) Definitely tuberculous ...	—	1	—	2	—	—	—	—	—	1	—	2	3	
(b) Diagnosis not completed...	—	—	—	—	—	—	—	—	—	—	1	1	2	
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	3	6	1	3	13	
C—Cases written off the dispensary register as														
(a) Recovered ...	—	—	—	—	—	—	1	1	—	—	1	1	2	
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the dispensary register as tuberculous) ...	—	—	—	—	—	—	—	—	33	34	11	17	95	
D—Number of cases on dispensary register on Dec. 31st :—														
(a) Definitely tuberculous ...	286	221	117	111	10	10	65	66	296	231	182	177	886	
(b) Diagnosis not completed...	—	—	—	—	—	—	—	—	4	3	2	2	11	

1. Number of cases on dispensary register on January 1st ...	855	8. Number of visits by tuberculosis officer to homes (including personal consultations) ...	19
2. Number of cases transferred from other areas and cases returned after discharge under head 3 in previous years ...	4	9. Number of visits by nurses or health visitors to homes for dispensary purposes ...	2700
3. Number of patients transferred to other areas, cases not desiring further assistance under the scheme and cases "lost sight of" ...	21	10. Number of	
4. Cases written off during the year as dead (all causes) ...	45	(a) Specimens of sputum, &c., examined ...	180
5. Number of attendances at the dispensary (including contacts) ...	1982	(b) X-ray examinations made in connection with dispensary work ...	164
6. Number of insured persons under domiciliary treatment on the 31st December ...	101	11. Number of "recovered" cases restored to dispensary register and included in A(a) and A(b) above ...	—
7. Number of consultations with medical practitioners :—		12. Number of "T.B. plus" cases on dispensary register on 31st December ...	99
(a) Personal ...	9		
(b) Otherwise ...	176		

The 95 non-tuberculous persons revealed the following conditions :—
 bronchitis, 33 ; pulmonary fibrosis, 13 ; no apparent disease, 9 ; asthma, 4 ; chronic tonsillitis, 3 ; anaemia, 3 ; rickets, 3 ; acute adenitis, 2 ; gastritis, 2 ; and 1 each, myalgia, neurasthenia, apical pneumonia, adenoids, arthritis, myocarditis, chronic infective endocarditis, cardiac disease, tonsils and adenoids, whooping cough, hilus enlargement, bronchiectasis, retroversion of uterus, syphilis, emphysema, paralysis following anterior poliomyelitis, enteritis, sebaceous cyst, old empyema, valvular disease of heart, resolving empyema, post pneumonic atelectasis, undescended testicle.

The following summary shows the clinical condition of all patients at the end of 1932, classified as (a) pulmonary cases and (b) non-pulmonary cases, arranged according to the years in which they first came under public medical treatment ; —

(a) PULMONARY TUBERCULOSIS.

Condition at the time of the last record made during the year to which the return relates.	Previous to 1926				1926				1927				1928				1929				1930				1931				1932				
	Class T.B. plus.				Class T.B. plus.				Class T.B. plus.				Class T.B. plus.				Class T.B. plus.				Class T.B. plus.				Class T.B. plus.				Class T.B. plus.				
	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus.)	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus.)	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus.)	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus.)	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus.)	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus.)	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus.)	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus.)	
(a) Remaining on dispensary register on 31st December.	Class T.B. minus.	69	38	75	24	14	25	1	20	27	2	25	1	20	27	32	4	21	22	22	4	5	1	1	1	1	1	1	1	1	1	1	1
	Disease arrested—	Adults M.	1	7	2	10	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	F.	1	3	1	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	Children	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Disease not arrested	Adults M.	11	5	1	6	1	1	1	3	1	1	1	4	1	1	1	2	2	2	2	2	1	7	4	1	7	4	1	15	8	9	12	22
	F.	11	1	1	1	1	1	1	1	1	1	1	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	Children	10	1	1	1	1	1	1	1	1	1	1	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	Condition not ascertained during the year ...	...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Total on dispensary register at 31st December	...	214	18	2	22	70	1	79	1	3	2	6	100	2	4	1	7	5	2	1	8	20	5	5	11	11	2	24	3	11	4	18	51
	Adults M.	57	15	11	11	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	F.	34	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	Children	58	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Lost sight of, or otherwise removed from dispensary register	...	161	6	1	7	41	1	33	1	3	1	4	12	1	2	1	2	6	2	2	2	2	3	3	1	1	1	4	1	1	1	1	1
	Adults M.	20	15	11	11	4	1	7	1	8	13	21	5	1	6	5	12	6	4	1	5	6	2	2	1	1	1	12	1	1	1	1	1
	F.	8	1	1	1	5	1	5	1	1	1	8	2	1	6	2	8	2	1	4	3	1	1	1	1	1	1	1	1	1	1	1	1
	Children	4	1	1	1	4	1	1	1	1	1	2	1	1	1	1	1	1	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1
Total written off dispensary register ...	...	342	23	15	43	54	2	45	1	12	23	35	20	1	14	7	22	15	8	13	11	6	16	2	24	3	11	4	1	4	18	52	1
	Adults M.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	F.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Children	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
GRAND TOTALS	...	556	41	17	65	124	3	124	1	15	25	41	120	3	18	8	29	85	31	31	31	11	18	2	31	14	22	6	42	3	15	11	29
	Adults M.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	F.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Children	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...

(b) NON-PULMONARY TUBERCULOSIS.

Condition at the time of the last record made during the year to which the return relates.	Previous to 1926				1926				1927				1928				1929				1930				1931				1932			
	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.		
(a) Remaining on dispensary register on 31st December.	Disease arrested—	Adults	M.			Disease not arrested	Adults	M.			Condition not ascertained during the year	...				Total on dispensary register at 31st December	...															
		F.	Children				F.	Children																								
(b) Not now on dispensary register and reasons for removal therefrom.	Discharged as recovered	Adults	M.			Lost sight of, or otherwise removed from dispensary register	...				Dead—	Adults	M.			Total written off dispensary register	...															
		F.	Children				F.	Children																								
GRAND TOTALS of (a) and (b) (excluding those transferred to pulmonary)																																

OAKWOOD HALL SANATORIUM.

Oakwood Hall Sanatorium is situated in exceptionally pleasant surroundings at an altitude of 277 feet and in grounds $66\frac{3}{4}$ acres in extent. It comprises three treatment blocks ; an administrative block ; a block including schoolroom, dining-room and scout-rooms, etc. ; the medical officer's house ; the lodge occupied by the head gardener ; and a semi-detached villa, one half of which is occupied by the head porter, and the other half comprising the quarters for the night staff.

Accommodation for 100 patients is provided, 70 beds being utilised by the Borough, and the remaining 30 rented by the West Riding County Council.

The nursing staff consists of the matron, 4 sisters, and 14 nurses.

162 Borough cases were admitted during the year which is an increase of 23 (or 16.5%) on the previous year. This means that the average duration of stay was shorter, though, it is believed, without detriment to the efficacy of the treatment. 153 cases were discharged and 10 died. Particulars are given below.

Number of patients in hospital.				1/1/32	Admitted.	Dis-charged.	Died.	31/12/32
Obser- vation cases.	Adults.	M.	...	2	10	11	—	1
		F.	...	—	11	10	—	1
	Children		...	1	9	10	—	—
Total ...				3	30	31	—	2
Ac- cepted cases.	Adults.	M.	...	24	61	48	6	31
		F.	...	19	28	34	3	10
	Children		...	24	43	40	1	26
Total ...				67	132	122	10	67
Grand total ...				70	162	153	10	69

In addition 66 West Riding cases were admitted during the year of which 50% were for observation.

The period of observation on the 31 suspicious cases showed 16 to be tuberculous, 11 to be non-tuberculous, while 4 cases left before diagnosis was completed. Details are given in the following table.

Diagnosis on discharge from observation		For pulmonary tuberculosis.						For non-pulmonary tuberculosis.						Totals		
		Stay under 4 weeks			Stay over 4 weeks			Stay under 4 weeks			Stay over 4 weeks					
		M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch
Tuberculous	...	1	—	—	4	3	5	—	—	1	—	—	2	5	3	8
Non-tuberculous	...	—	2	—	5	2	1	—	—	—	—	—	1	5	4	2
Doubtful	...	1	1	—	—	—	—	—	2	—	—	—	—	1	3	—
Totals	...	2	3	—	9	5	6	—	2	1	—	—	3	11	10	10

The immediate results of the treatment of definitely tuberculous patients discharged from the sanatorium during the year are given in the following table:—

Classification on admission to the institution.		Condition at time of discharge.	Duration of residential treatment in the institution.															Grand totals.
			Under 3 months.			3—6 months.			6—12 months.			More than 12 months.			Totals.			
			M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch	
PULMONARY TUBERCULOSIS.	Class TB minus.	Quiescent	3	3	5	4	1	3	2	1	—	—	—	—	5	8	22	
		Not quiescent	3	4	2	5	4	2	5	1	3	—	—	1	9	8	30	
		Died in institution ...	1	—	—	—	—	—	—	—	—	—	—	1	—	—	1	
	Class TB plus Group 1.	Quiescent	—	—	—	—	—	—	—	—	1	—	—	—	—	1	1	
		Not quiescent	1	—	—	3	—	—	1	1	—	—	—	5	1	—	6	
		Died in institution ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Class TB plus Group 2.	Quiescent	—	—	—	—	—	—	1	—	—	—	—	1	—	—	1	
		Not quiescent	4	3	—	3	5	—	3	2	—	1	1	11	11	—	22	
		Died in institution ...	2	—	1	—	1	—	—	—	—	—	—	2	1	1	4	
	Class TB plus Group 3.	Quiescent	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Not quiescent	2	1	—	—	—	—	1	1	—	—	1	3	3	—	6	
		Died in institution ...	1	—	—	1	2	—	1	—	—	—	—	3	2	—	5	
NON-PULMONARY TUBERCULOSIS.	Bones and joints.	Quiescent	1	—	4	—	—	—	—	1	—	—	1	2	1	2	9	
		Not quiescent	4	2	—	—	1	—	—	—	—	—	2	4	3	2	9	
		Died in institution ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Abdominal.	Quiescent	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Not quiescent	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Died in institution ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Other organs.	Quiescent	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Not quiescent	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Died in institution ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Peri-pheral glands.	Quiescent	—	—	3	—	—	8	—	—	—	—	—	—	—	11	11	
		Not quiescent	—	—	1	1	—	1	—	—	1	—	1	1	—	4	5	
		Died in institution ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	

GENERAL TREATMENT.

The general principles of treatment adopted remain as in previous years, the basis being graduated rest and exercise supplemented by appropriate secondary methods in certain cases.

PNEUMOTHORAX :—

Of these the most important is the method of collapse therapy by artificial pneumothorax. The number of patients undergoing this treatment is as yet small. As the treatment was only introduced into Rotherham in the latter part of 1931 some little time has had to elapse in establishing its worth in the eyes of the patient populace and in gaining their confidence. The results met with in this short time are very encouraging.

RADIOLOGY :—

The X-Ray plant continues to give satisfactory results. In all 456 films were taken during the year, this total including radiograms of out-patients from the Tuberculosis Dispensary. The value of frequent radiograms in the diagnosis, assessment, and treatment of particular cases has become more and more apparent.

LIPIODOL :—

In cases where the bronchi are suspected the use of lipiodol may make the diagnosis certain. The practice adopted has been to inject it by the crico-thyroid route in all adults and in most children. In some children it has been given by the supraglottic route, but contrary to the experience of some writers this method has not proved satisfactory. No bad effects have been met with following the use of this substance.

ULTRA-VIOLET RAYS :—

The Jesionek and Kromayer lamps continue to be of great use in the treatment of certain selected cases. The Kromayer lamp is invaluable in cases of lupus and tuberculous ulceration of the skin. No case of pulmonary tuberculosis of the adult type was treated by ultra-violet rays as no success has been met with previously. In all, 36 cases were treated, 25 having general light baths with the Jesionek lamp, 6 having local treatment with the Kromayer lamp, and the remaining 5 having both local and general treatment.

DENTAL TREATMENT :—

The provision of dental treatment for tuberculous patients has been strongly advocated for many years. The absence of facilities for this make a big blank in the perfection of the tuberculosis scheme as full benefit of sanatorium and other treatment is not gained.

RECREATION :—

The large plot of grass in front of the men's block was converted into an eighteen hole putting green which has proved a popular and suitable game for the male patients. Bowls is also popular. A clock golf course has been provided for the female patients. The billiard table was re-covered in May, and our thanks are due to Mr. Laurance Steeples who was at that time a patient, for many helpful suggestions and for using his influence to get the work done expeditiously and cheaply.

Attention is drawn to the long felt need of recreation rooms for the patients. A children's recreation room could be provided if the suggestion made by the Board of Education (see School) is adopted.

For the adult patients the present facilities are quite inadequate, consisting only of the conservatory and billiard room. The conservatory is at the disposal of the men and women alternately, so that for 50% of the recreation time the women are without a common room. Being cold in winter, the conservatory does not encourage patients to sit there playing games such as cards, draughts, dominoes ;

the result is that patients are prone to play their games in the cubicles, sitting on the beds, etc.; others drift in to watch the play, and the cubicle becomes overcrowded. What is there for patients to do on a rainy day in winter? Provision of adequate recreation rooms would greatly facilitate the maintenance of discipline.

LIBRARY :—

In connection with the Public Library, a library was opened at the sanatorium, and we are greatly indebted to Mr. Boardman, Chief Librarian, for the keenness and interest he has shown in the Oakwood branch. Mr. Boardman chose the books for the library, and the sustained popularity this has enjoyed since its opening by Alderman Harper is an index to the care and thought displayed in making the choice. The library contained more than 350 books at the end of the year. Mrs. Eyre, the school teacher, has carried out the duties of librarian since its opening.

THE SCHOOL :—

The number of children admitted during the year was 66—29 boys and 37 girls, 7 being readmissions. 22 children were unable to read or write, and this percentage is testimony to the educational benefit which can be derived by the children while their bodily health is being improved. Mrs. Eyre reports that a very large majority of the children have not attended school for long periods owing to physical disability so that they are generally far below the average child in educational matters. Marked improvement, however, is noted and the power of concentration strengthens as the physical condition improves. The children also derive great benefit from the library from which they borrow twenty volumes twice weekly.

The annual children's picnic took place to Edwinstowe on June 25th. The weather was excellent and the outing was a huge success.

On December 9th, the school was inspected by Dr. Muriel C. Bywaters, one of the medical officers of the Board of Education. Following on her report to the Board, a communication was received by the Town Clerk of which the following is an extract "The Board note with appreciation that the school is doing good work and that it is organised on sound lines, also that the children are happy and interested in their work and make suitable progress. I am, however, to draw attention to the desirability of providing a separate dining room for the children and to suggest that the old dining room no longer in use should be put into a state of repair and cleanliness for use as a children's dining and recreation room."

BROWNIES AND GIRL GUIDES :—

Mrs. Eyre has also charge of the brownie and girl guide troops.

BOY SCOUT MOVEMENT :—

The year marked the coming of age of the Rotherham Boy Scout Movement, and an exhibition of work done by all the troops in the County Borough was held in the Drill Hall in April. At this exhibition the Oakwood Troop (29th Rotherham)

distinguished themselves by gaining 5 awards—one first, two seconds and two thirds. The troop consisted of 9 scouts, four of whom attained second class, and 11 wolf cubs. Of the cubs two attained two-star class, and four one-star class. Some of our boys have entered into correspondence with scouts and cubs of other sanatoria. The commendable work of scoutmaster has been carried out by Mr. William Lucas who has displayed great enthusiasm over the progress of his charges throughout the year.

TRAINING OF NURSES :—

No nurses attempted part 2 of the examination for the certificate of the Tuberculosis Association. Only two nurses attempted part 1 and both passed the examination.

ALMA ROAD HOSPITAL.

In the following extract from T. 145 of the Ministry of Health, the position with regard to the number of beds available for the treatment of tuberculosis in the Alma Road Hospital as on 31st December, 1932, is given. For pulmonary cases there are 21 beds, 15 for adults and 6 for children under 15 years of age. For non-pulmonary cases there are no definite beds provided, but the patients are nursed in the general wards.

The following table shows the number of patients treated in the hospital during the year who were chargeable to the Rotherham County Borough Council :—

Number of patients in hospital.				1/1/32	Admitted.	Discharged	Died.	31/12/32
Pulmonary cases.	Adults.	M. ...		5	9	4	6	4
		F. ...		4	6	5	2	3
	Children	... ..		2	—	—	2	—
	Total ...	... ..		11	15	9	10	7
Non-pulmonary cases.	Adults.	M. ...		—	3	2	—	1
		F. ...		1	3	2	2	—
	Children	... ..		2	—	2	—	—
	Total ...	... ..		3	6	6	2	1
Grand total				14	21	15	12	8

TUBERCULOSIS CARE COMMITTEE.

The work of this important voluntary committee has already been made the subject of a third annual report, but as its activities are so intimately connected with the statutory tuberculosis work of the Borough, extracts dealing more or less with the therapeutic aspects of the committee's functions are necessary to make a complete picture.

During the year 61 persons were granted extra nourishment by the committee, 43 from the Corporation fund and 18 from the voluntary fund. In all 287 grants were made, 231 from the Corporation fund and 56 from the voluntary fund.

The considerable reduction from last year of the number of grants out of the voluntary fund has been mainly due to the arrangement made with the Public Assistance Committee whereby they now accept the tuberculosis officer's certificate for grants of extra medical necessities (including extra nourishment) to cases in receipt of Public Assistance relief.

The grants of extra nourishment comprised 1185 gallons of milk ; 6181 eggs ; 828 lbs. of meat ; and 8 lbs. of cod liver oil and malt. Three grants of underclothing were made to special cases in the sanatorium.

During the year the committee extended their car park scheme from one park in Corporation Street to three parks, the other two being at the Crofts and at Westgate Station, the former being opened in March and the latter in June. With this extension five men were given regular employment and fair wages, instead of two, which in itself was a worthy achievement in these times of industrial depression. In all, seven men were employed. They were medically reviewed three times, and two found reasonably fit were discharged.

A system of weekly parking tickets was instituted during the year. The present charge is 2/- per week, which allows unlimited parking at any of the committee's car parks. As compared with parking fees charged in other towns, the committee's scale of charges is well on the reasonable side.

Towards the end of the year the committee approved of a scheme of home helps, which it is hoped will provide employment for female ex-sanatorium patients. At the same time it is hoped to remove one of the most difficult problems which faces a married woman requiring sanatorium treatment, that of obtaining the services of someone to look after her home whilst she is away. A healthy girl or woman is often very reluctant to work in a home from which a member of the family has had to enter a sanatorium, and the scheme adopted overcomes this by the employment of ex-sanatorium female patients as daily helps.

The ex-patients to be employed will be drawn from that type of patient, who, had they not been suffering from a tubercular disease, would have followed domestic employment, and who, by their residence in sanatorium, have had their physical condition so improved as to allow them to be able to undertake this employment. By

their stay in sanatorium they will have been educated in precautionary measures against the disease, and the prejudice against employment in such circumstances overcome.

All persons employed as home helps will be examined by the tuberculosis officer before and during employment.

The families assisted by this scheme are those where the father is in employment, as generally the need of help in this manner is not required when the father is unemployed and at home to take charge of his domestic affairs. Charges are made according to a sliding scale of income after the deduction of rent. For a family of three persons with an income below £1 5s. the services of the home help are free; from £1 5s. to £1 7s. 6d. one-twelfth of the home help's wages are charged, and for each 2/6 or part thereof over this amount an additional twelfth of the wages is charged. The scale is loaded concurrently for each additional member of the family at the rate of 2/6 per head, so that for a family of four persons the free scale is £1 7s. 6d. and charges commence over this amount.

It is to be remembered that as the services of the home helps will be required for the period of the patient's stay in sanatorium, which may be up to six months or more, the committee's scale of charges is kept low as part of their help towards the assistance of the family.

Up to the end of the year no applications were received for this service, which is expected will meet the need of perhaps six cases a year at the commencement. Possibly there may be some practical difficulties in the scheme as it stands at present, but it is hoped these will be surmounted as they arise.

However, the scheme is a start in the provision of employment for female ex-patients, and if it is successful, which is sincerely hoped, the cost per patient assisted will be less than that of providing extra nourishment.

Many other schemes outlined in the original programme are as yet held up until the committee have sufficient funds.

It is hoped that when the financial horizon brightens the committee will be enabled to extend their activities instead of as at present being forced into the adoption of palliative measures due to lack of finance.

SECTION VIII.

VENEREAL DISEASES.

During the year 1932, there were 9,600 attendances made by patients attending the Venereal Diseases Centre, which in the highest since the centre was opened. This figure is an increase of 484 over 1931, and 971 more than five years ago in 1928. This increase is due to better attendance by patients for treatment during the past two years, for whilst the total number of patients has remained fairly constant, the attendances have increased.

The number of cases of syphilis remained stationary for the year under review, whilst there was an increase of 25 patients suffering from gonorrhoea over the previous year.

The treatment of primary cases of syphilis has been much the same, namely, stabilarsan and sulphostab, combined with metallic bismuth. A few primary cases which have shown some local intolerance to metallic or collosol bismuth have had the bismuth salt in oil, and responded satisfactorily. Late and congenital cases have also had this oil preparation more extensively.

The increase in attendances of females necessitated the appointment of a part-time nurse for two sessions per week. The sessions attended by the medical officer are now working at full pressure and can, if attendances do not increase much more, probably be kept efficient at this rate. If, however, there is a further increase of attendances, the possibility of introducing additional medical sessions will have to be considered.

It is noteworthy that patients show a more serious desire to be cured and that new cases are losing a certain amount of timidity in approaching the centre. The large increase in attendances should not be viewed with alarm, but regarded as a direct result of the spread of knowledge, which is in the right direction.

In the following table is given the return relating to all persons who were treated at the Rotherham centre during the year ended 31st December, 1932.

	Syphilis		Soft chancre		Gonorrhoea		Con- ditions other than venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Tot.
1. Number of cases on 1st January under treatment or observation ...	40	32	—	—	49	23	1	3	90	58	148
2. Number of cases removed from the register during any previous year which returned during the year under report for treatment or observation of the same infection ...	2	7	—	—	6	1	4	1	12	9	21
3. Number of cases dealt with for the first time during the year under report (exclusive of cases under item 4) suffering from :—											
Syphilis, primary ...	4	1	—	—	—	—	—	—	4	1	5
,, secondary ...	—	—	—	—	—	—	—	—	—	—	—
,, latent in 1st year of infection ...	1	3	—	—	—	—	—	—	1	3	4
,, all later stages ...	8	2	—	—	—	—	—	—	8	2	10
,, congenital ...	3	12	—	—	—	—	—	—	3	12	15
Soft chancre ...	—	—	—	—	—	—	—	—	—	—	—
Gonorrhoea, 1st year of infection ...	—	—	—	—	59	19	—	—	59	19	78
,, later ...	—	—	—	—	7	4	—	—	7	4	11
Conditions other than venereal ...	—	—	—	—	—	—	34	11	34	11	45
4. Number of cases dealt with for the first time during the year under report known to have received treatment at other centres for the same infection ...	—	—	—	—	2	2	—	—	2	2	4
TOTALS OF ITEMS, 1, 2, 3 AND 4	58	57	—	—	123	49	39	15	220	121	341
5. Number of cases discharged after completion of treatment and final tests of cure (see item 15). ...	1	—	—	—	12	2	35	10	48	12	60
6. Number of cases which ceased to attend before completion of treatment and were, on first attendance, suffering from :—											
Syphilis, primary ...	3	1	—	—	—	—	—	—	3	1	4
,, secondary ...	—	1	—	—	—	—	—	—	—	1	1
,, latent in 1st year of infection ...	1	—	—	—	—	—	—	—	1	—	1
,, all later stages ...	9	6	—	—	—	—	—	—	9	6	15
,, congenital ...	5	7	—	—	—	—	—	—	5	7	12
Soft chancre ...	—	—	—	—	—	—	—	—	—	—	—
Gonorrhoea, 1st year of infection ...	—	—	—	—	44	15	—	—	44	15	59
,, later ...	—	—	—	—	11	4	—	—	11	4	15

	Syphilis		Soft chancre		Gonorrhoea		Con- ditions other than venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Tot.
7. Number of cases which ceased to attend after completion of treatment but before final tests of cure (see item 15)	1	1	—	—	6	1	—	—	7	2	9
8. Number of cases transferred to other centres or to institutions, or to care of private practitioners	—	—	—	—	3	4	—	—	3	4	7
9. Number of cases remaining under treatment or observation on 31st December	38	41	—	—	47	23	4	5	89	69	158
TOTALS OF ITEMS 5, 6, 7, 8 AND 9 ... (These totals should agree with those of items 1, 2, 3 and 4)	58	57	—	—	123	49	39	15	220	121	341
10. Number of cases in the following stages of syphilis included in item 6 which failed to complete one course of treatment :—											
Syphilis, primary	1	—	—	—	—	—	—	—	1	—	1
„ secondary	—	—	—	—	—	—	—	—	—	—	—
„ latent in 1st year of infection	—	—	—	—	—	—	—	—	—	—	—
„ all later stages	3	3	—	—	—	—	—	—	3	3	6
„ congenital	2	6	—	—	—	—	—	—	2	6	8
11. Number of attendances :—											
(a) for individual attention of the medical officers	1065	761	—	—	983	499	150	80	2198	1340	3538
(b) for immediate treatment, e.g., irrigation, dressing	23	—	—	—	5013	743	221	62	5257	805	6062
TOTAL ATTENDANCES	1088	761	—	—	5996	1242	371	142	7455	2145	9600
12. In patients :—											
(a) Total number of persons admitted for treatment during the year	—	1	—	—	—	4	—	—	—	5	5
(b) Aggregate number of “in-patient days” of treatment given	—	26	—	—	—	51	—	—	—	77	77
	Under 1 year		1 and under 5 years		5 and under 15 years		15 years and over		Totals.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
13. Number of cases of congenital syphilis in item 3 above classified according to age periods	—	—	—	—	3	3	—	9	3		12

	Arsenobenzene compounds	Mercury	Bismuth		
14. Chief preparations used in treatment of syphilis :—		Tab. hyd. c̄cret. Pil. Hutchinson Pil. hyd. iod. viridis.	Metallic bsmth. Bismostab Bisantol.		
(a) Names of preparations	Stabilarsan Sulphostab.				
(b) Total number of injections given (out-patients and in-patients)	260	—	—		
(c) Number of injections <i>included in</i> (b) given to patients who on first attendance at this centre were suffering from primary and secondary syphilis ...	130	—	169		
15. Are the tests recommended in Memo. V21 as amended by Memo. V21A followed in deciding as to the discharge of the patient after treatment and observation for syphilis and gonorrhoea ?	Yes				
If not, in what way are they modified ?	—				
	Microscopical		Serum tests		
	For spirochetes	For gonococci	Wassermann	Others for syphilis	For gonorrhoea
16. Pathological Work :—					
(a) Number of specimens examined at and by the medical officer of the treatment centre ...	—	276	—	—	—
(b) Number of specimens from patients attending at the centre sent for examination to an approved laboratory	—	—	142	—	—

The following is a statement of new cases attending the treatment centre during the year, classified according to the areas in which the patients resided :—

Name of County or County Borough in which patients resided.	Rotherham	Yorks. W.R.	Derbyshire C.C.	Lincolnshire (Part of Lindsey)	Isle of Ely	Sheffield	Walsall	Total
Number of cases in items 3 and 4 from each area found to be suffering from :—								
Syphilis	14	20	—	—	—	—	—	34
Soft chancre	—	—	—	—	—	—	—	—
Gonorrhoea	50	39	—	1	1	1	1	93
Conditions other than venereal	20	24	—	—	—	—	1	45
Total	84	83	—	1	1	1	2	172

The services rendered at the treatment centre during the year, classified according to the areas in which the patients resided, are shown in the following table :—

Name of County or County Borough in which patient resided.	Rotherham	Yorks. W.R.	Derbyshire C.C.	Lincolnshire (Part of Lindsey)	Isle of Ely	Sheffield	Walsall	Total
Total number of attendances of all patients residing in each area	6557	2978	7	10	12	25	11	9600
Aggregate number of "in-patient days" of all patients residing in each area	51	26	—	—	—	—	—	77
Number of doses of arsenobenzene compounds given in the out-patient clinic and in-patient department to patients residing in each area	176	81	3	—	—	—	—	260

The following table presents a review of the statistics of the patients treated, and attendances at the centre, during the past five years :—

Year	1928	1929	1930	1931	1932
Number of persons attending who were suffering from :—					
Syphilis	107	89	119	116	115
Soft chancre	16	2	7	—	—
Gonorrhoea	206	188	185	147	172
Conditions other than venereal	44	78	72	71	54
Totals	373	357	383	334	341
Total out-patient attendances	8639	8952	9094	9116	9600
Total in-patient days	92	257	32	31	77

The pathological work performed during the past five years in connection with venereal diseases is summarised in the following :—

	For detection of			For Wassermann re-action.				
	Spirochetes.	Gonococci.	Organisms. other					
Examinations of pathological material :—								
(a) Specimens which were examined at the Public Health Laboratory during the years :—								
1928	—	117	—	—
1929	—	407	—	—
1930	2	280	—	—
1931	—	171	—	—
1932	—	276	—	—
(b) Specimens from persons attending at the treatment centre which were sent for examination to an approved laboratory during the years :—								
1928	—	—	—	230
1929	—	—	—	191
1930	—	—	1	195
1931	—	—	—	180
1932	—	—	—	142

Besides the 142 tests for the Wassermann re-action which were sent from the centre, there were 212 tests for Wasserman re-action, 1 for spirochetes and 1 for gonococci sent to the Sheffield University Bacteriological Laboratory on behalf of local medical practitioners.

SECTION IX.

MATERNITY AND CHILD WELFARE.

MIDWIVES.

During the year 1932, twenty-three midwives practised in the County Borough of Rotherham. The number of untrained or "bona-fide" midwives is slowly decreasing until now there are only four left. Several midwives outside the Borough take one or two cases during the year in the town.

The midwives resident in the Borough were inspected at intervals of three months as far as possible. At these visits of inspection their books, bags, appliances, and homes under went a thorough investigation. In addition to these quarterly visits 54 special visits were paid in connection with various matters appertaining to their work.

There were only two suspensions during the year. One followed a case of pemphigus, and the other was owing to haemolytic streptococci being found in the midwife's throat thus rendering her a "carrier" of puerperal sepsis. This midwife was still under suspension at the end of the year; she received compensation for loss of the cases she had booked.

The statistics for 1932 are given in the following table :—

Certificate number.	No. of cases.	Infants born alive.	Stillborn.	Dead.	Died within 3 days.	Feeding. 1st month.		Ophthalmia.	Puerperal fever.	Puerperal pyrexia.	Pemphigus.	Mothers dead.	Illegitimate.	Twins.	Medical aid		
						Breast entirely.	Breast &/or artificial.								Ante natal.	Neo and post natal.	For infant.
57198	91	88	4	4	3	70	18	1	—	—	—	—	2	1	84	54	11
24756	16	15	1	1	—	14	1	—	—	—	—	—	—	—	—	2	2
5767	3	3	—	—	—	2	1	—	—	—	—	—	—	—	—	—	—
8590	17	16	1	1	1	15	1	—	—	—	—	—	—	—	—	1	2
47557	1	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
4924	1	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
63306	1	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
69712	2	2	—	—	—	2	—	—	—	—	—	—	—	—	—	1	—
40344	83	84	2	3	—	66	18	1	—	—	—	—	1	3	9	23	5
71521	14	14	—	—	—	12	2	—	—	—	—	—	—	—	2	3	—
2910	13	12	1	1	—	10	2	—	—	—	—	—	—	—	1	3	—
66154	55	54	1	2	1	51	3	—	—	1	—	—	2	—	2	9	3
73941	2	2	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—
78373	8	8	—	1	1	7	1	—	—	—	—	—	—	—	1	2	—
3857	58	58	1	3	1	43	15	1	—	—	—	—	3	1	11	7	10
44515	56	53	3	3	1	46	7	—	—	—	—	—	1	—	58	21	8
70641	54	50	4	1	—	42	8	1	—	—	—	—	2	—	32	24	6
74737	9	9	—	—	—	9	—	—	1	—	—	—	—	—	2	1	—
40576	49	49	—	2	1	45	4	—	—	—	—	—	—	—	10	11	2
64479	17	17	—	1	—	15	2	—	—	—	—	—	1	—	2	8	—
34006	20	21	—	1	1	18	3	—	—	—	—	—	—	1	32	13	4
55602	4	4	—	2	—	4	—	1	—	—	—	—	—	—	1	3	1
45089	44	43	2	4	2	32	11	1	—	2	1	—	—	1	40	18	17
Total	618	605	20	30	12	508	97	6	1	3	1	—	12	7	287	203	71

A summary of the reasons for sending for medical aid during the year 1932 is given in the following tables :—

PREGNANCY.									
Loss of blood	...	...	...	...	...	...	...	...	10
Excessive sickness	...	...	...	...	...	...	...	...	6
Puffiness of hands or feet	...	...	...	...	...	...	...	...	14
Dangerous varicose veins	...	...	...	...	...	...	...	...	7
Ante-natal examinations	...	...	...	...	...	...	...	...	217
Other causes	...	...	...	...	...	...	...	...	33
									<hr/> 287

LABOUR AND LYING-IN.									
Malpresentation	...	...	...	...	...	...	...	...	18
Loss of blood	...	...	...	...	...	...	...	...	10
Ruptured perineum	...	...	...	...	...	...	...	...	44
Delay in labour	...	...	...	...	...	...	...	...	99
Raised temperature	...	...	...	...	...	...	...	...	12
Other causes	...	...	...	...	...	...	...	...	20
									<hr/> 203

THE CHILD.									
Still-born	...	...	...	...	...	...	...	...	20
Dangerous feebleness	...	...	...	...	...	...	...	...	12
Inflammation of the eyes	...	...	...	...	...	...	...	...	23
Inflammation of the navel	...	...	...	...	...	...	...	...	2
Other causes	...	...	...	...	...	...	...	...	14
									<hr/> 71

In connection with the maternity service there is one point which is causing considerable anxiety to the department. This is the competition between qualified midwives and the so called handywoman.

The position of the midwife in Rotherham is that she is employed by her patients and not subsidised by the Health Department. This means that she is dependent on her practice for her living ; she has no provision for sickness ; she has no pension to look forward to ; in some cases she has an unemployed husband and family to a certain extent dependent on her earnings ; and she is an indispensable member of the community.

She has spent time over training and obtaining her qualifications, and is qualified to render efficient service, which is continually being brought up to date. (Short lectures are given at various times during the year to the midwives by the Assistant Medical Officer of Health, on points of interest in practice and recent developments ; these are well attended).

The handywoman is of course a legacy from the Dark Ages when Medicine and the Black Arts were still running in double harness. She is usually totally unskilled ; in some cases so ignorant that writing her name is an impossibility. She is usually impecunious and sees in nursing a field for minor exploitations, and a possibility

of supplementing a slender income. These people are under no sort of control or supervision, and with few exceptions have had no training in general nursing.

The situation between these two groups is this :

FIRSTLY : The average lay mind is still insufficiently educated to be able to appreciate the seriousness of a normal confinement. Without wishing to be unduly laborious it is a fact that a normal confinement should be treated with the same gravity as an open operation, such as appendicectomy. No one would dream of allowing an untrained person to assist at such an operation and this is a point which is appreciated by the layman.

SECONDLY : The handywoman is usually willing to accept a very low scale of recompense, occasionally being paid in other ways than cash. She is therefore seriously under-cutting the midwife. Often she is well known in the community and makes a point of keeping in touch with possible cases.

THIRDLY : The choice of nurse is left with the patient, and the doctor in the case has usually to be content with whomever he finds in possession of the case when he arrives. Free choice of nurse is of course necessary, but should be limited to a choice of qualified people. If a doctor refuses to attend a case with a handywoman he usually loses the case and another doctor is found who will oblige. It is a rather rare occurrence for a handywoman to be given back word by a patient. The chief point in the argument against handywomen is, that it is in cases under their care where the more serious emergencies of obstetrical practice usually arise ; owing to the fact that, having had no training, the nurse is unable to recognise the early development of trouble. The proper practice of obstetrics is not the skillful treatment of emergencies but the foreseeing and avoiding of them whenever possible.

These conditions could be met firstly by the close co-operation of every practitioner, and secondly by subsidising midwives by the Health Authority, and thirdly by the further education of the general public.

The present situation is discouraging, most of all to the midwives and also to the controlling body. There is still the same tendency to employ the handywoman as there was ten years ago and more. This should not be. In every branch of medicine and social service marked advances have been made ; but the practice of midwifery, despite the agitation caused by the report of the Committee on Maternal Mortality, still remains in the old state of " laissez faire."

ANTE-NATAL CLINICS.

During the year 2,292 attendances were made at the three ante-natal clinics held in the Borough. The clinics were held at the following institutions :—

Institution.	Purpose of clinic.	Day and time of session.
Ferham House	Maternity Home cases	Wednesday 2.30 p.m.
Ferham House	District midwifery cases	Monday 2.0 p.m.
Alma Road Hospital	Maternity ward cases	Friday 10.30 a.m.

Detailed information respecting the individual clinics follows in the succeeding sub-sections. It is interesting to note that 659 expectant mothers attended these clinics during the year, which number represents 48 per cent of the total notified births and still-births.

FERHAM HOUSE MATERNITY HOME ANTE-NATAL CLINIC.

During the year, 269 cases attended the ante-natal clinic which is run in conjunction with the Municipal Maternity Home.

The following table gives comparative figures for the past five years :—

Year.	Number who attended for the first time.	Number of examinations made.	Average attendance per session.
1928 ...	332	894	17
1929 ...	273	1059	20
1930 ...	345	1009	20
1931 ...	290	1020	20
1932 ...	215	1046	20

DISTRICT ANTE-NATAL CLINIC, FERHAM HOUSE.

It was noted last year that following the appointment of Dr. Boyd, the time for the clinic was altered from Tuesday morning to Monday afternoon ; this alteration resulted in an immediate increase in attendance which has been well maintained. The value of this clinic to the district midwives is very great and is probably not fully realised as yet. It is still difficult to impress the importance of suitable ante-natal supervision on some mothers, more particularly the older cases ; but it is felt that people are being educated to realise that the care offered at the clinic is not merely fussiness. Unfortunately the emergency case still does arise, but it is safe to say that a large proportion of these emergencies are due to neglect by the patient either directly or indirectly.

A number of expectant mothers have been given free cod liver oil and syr. ferri phos. co. as used at the child welfare centres. These have all been debilitated cases and have shown marked improvement.

Some means is now necessary for procuring dental treatment for these expectant mothers ; none is yet available and the matter should not be shelved indefinitely.

The following table indicates the work of the clinic during the year :—

Sessions held.	Number who attended for the first time.	Number of examinations made.	Average attendance per session.
48	Ante-natal ... 257	659	15
	Post-natal ... 11	26	
	Birth-control ... 11	17	
	Total ... 279	702	

Of the 279 cases who attended, 180 cases were referred by midwives, 50 by health visitors, 9 from child welfare centres, 1 from a medical practitioner, and the remainder on their own.

In connection with this clinic, advice is given on post-natal conditions ; birth control information is also given to cases coming within the terms of Memorandum 153/M.C.W. of the Ministry of Health. During the year 11 cases attended for each of these purposes and made 43 attendances in all.

ANTE-NATAL CLINIC, ALMA ROAD HOSPITAL.

Sessions were held weekly at a clinic in connection with the maternity ward of the Alma Road Hospital, 133 patients making a total of 587 attendances.

FERHAM HOUSE MATERNITY HOME.

In spite of the improved housing conditions in the Borough and the general declining birth-rate, Ferham House Maternity Home year after year takes its constant number of births. The number of deliveries during the past five years are 193 in 1932, 192 in 1931, 179 in 1930, 174 in 1929 when the number of beds was reduced from 12 to 10, and 203 in 1928. Since the home was opened in 1920 a new need has been created amongst expectant mothers for hospital treatment and supervision during their confinement, and the appreciation of the maternity home services in these days when the question of maternal mortality is so much to the forefront of the politics of health can be gauged from the statistics of those who were confined in the home during the year. 37 patients had had previous confinements at the home and one had been confined at the home on two previous occasions. From these figures it will be seen that there is generally at least one patient in residence who has been previously confined in the home.

During the year 222 cases were admitted and include cases delivered, together with cases admitted and not confined at the year end, cases of "false" admission, cases requiring hospital treatment for some complication during the ante-natal period, etc.

The statistics for the year 1932 are given in the following table.

1	Number of beds	...	...	...	...	...	...	10
2	Number of cases admitted during 1932	...	...	...	...	...	...	222
3	Average duration of stay	...	...	...	...	...	...	11.7 days
4	Number of cases delivered by—							
	(a) midwives	...	...	...	...	...	...	183
	(b) doctors	...	...	...	...	...	...	10
5	Number of cases in which medical assistance was sought by the midwife in emergency	...	...	...	...	...	...	72
6	Number of cases notified as							
	(a) puerperal fever	...	...	...	...	...	...	—
	(b) puerperal pyrexia	...	...	...	...	...	...	4
7	Number of cases of pemphigus neonatorum	...	...	...	...	...	...	—
8	Number of infants not entirely breast fed while in the institution							—
9	Number of cases of ophthalmia neonatorum with result of treatment in each case	...	...	...	...	...	...	—
10	Number of maternal deaths							
	(i) ante-partum haemorrhage	...	...	...	...	...	...	1

11	(a) Number of foetal deaths								
	(i) stillborn...	...	...	...	...	...	...	...	10
	(ii) within 10 days of birth	...	...	...	...	...	...	...	3
	(b) Cause of death in each case, and results of postmortem examination (if obtainable).								
	(1) STILLBORN.								
	Prematurity	...	...	...	...	...	...	...	2
	Ante-partum haemorrhage	...	...	...	...	...	...	...	2
	Macerated foetus (previous history of miscarriages)	...	...	...	...	...	...	...	1
	Anencephalic	...	...	...	...	...	...	...	1
	Hydrocephalus	...	...	...	...	...	...	...	1
	Prolonged labour (5 days)	...	...	...	...	...	...	...	1
	Marked foetal distress	...	...	...	...	...	...	...	1
	Too quick 2nd stage following a long 1st stage	...	...	...	...	...	...	...	1
	(2) WITHIN 10 DAYS OF BIRTH.								
	Prematurity	...	...	...	...	...	...	...	2
	Intercranial haemorrhage	...	...	...	...	...	...	...	1

In addition to the daily visits of the Medical Officer, the Home was visited, weekly and as specially required, by Dr. Chisholm, the Obstetric Consultant. During the year 5 patients were transferred to the Norton Hall Annexe of Jessop's Hospital, 4 of whom were subsequently notified as puerperal pyrexia, and one case who had been admitted for ante-natal observation was transferred to the Alma Road Hospital for treatment.

During the year regular courses of lectures were given by Dr. Hallinan, the approved lecturer, to the pupil midwives attached to the staff and all were successful in obtaining the certificate of the Central Midwives Board.

ALMA ROAD HOSPITAL.

The following table gives particulars for the year 1932 of the cases dealt with at the maternity ward at the Alma Road Hospital.

1	Number of beds	...	...	...	...	...	...	...	13
2	Number of cases admitted during 1932	...	...	...	...	...	...	...	195
3	Average duration of stay	...	...	...	...	...	...	...	14
4	Number of cases delivered by—								
	(a) midwives	...	...	...	...	...	...	...	159
	(b) doctors	...	...	...	...	...	...	...	31
5	Number of cases in which medical assistance was sought by the midwife	...	...	...	...	...	...	...	51
6	Number of cases notified as—								
	(a) puerperal fever	...	...	...	...	...	...	...	—
	(b) puerperal pyrexia	...	...	...	...	...	...	...	1
7	Number of cases of pemphigus neonatorum	...	...	...	...	...	...	...	—
8	Number of infants not entirely breast fed while in the institution								14
9	Number of cases of ophthalmia neonatorum with result of treatment in each case	...	...	...	...	...	...	...	—

10	Number of maternal deaths	...	...	...	...	...	...	4
	(1) Pleurisy.							
	Puerperal septicaemia.							
	Recent confinement.							
	(2) Pulmonary embolism.							
	Pregnancy.							
	(3) Cardiac failure.							
	Ruptured uterus.							
	Obstructed labour (hydrocephalus).							
	(4) Failing compensation of heart							
	Rheumatic endocarditis.							
	Pregnancy.							
11	Number of infant deaths—							
	(i) stillborn	...	...	...	...	...	...	23
	(ii) within 10 days of birth	...	...	...	...	...	...	6

Cause of death in each case, and results of postmortem examination.

(i) STILLBIRTHS.

- 1 Hydramnios. Forceps applied.
- 2 Hyperemesis gravidarum. Barnes' bag inserted. Macerated foetus.
- 3 Transverse lie. Breech delivery.
- 4 Brow became a face L.M.H. Version performed.
- 5 Prematurity.
- 6 Anencephalic foetus.
- 7 Albuminurea. Breech.
- 8 Prolapsed cord.
- 9 Version performed. Forceps applied 3 or 4 times before admission.
- 10 P.R.O.P. Forceps under G.A.
- 11 Pre-eclamptic mother.
- 12 Hydrocephalus and spina bifida.
- 13 Extended breech. Albuminurea.
- 14 A.P.H. Albuminurea.
- 15 A.P.H. Placenta praevia (central).
- 16 A.P.H. Macerated.
- 17 Anencephalic foetus.
- 18 Spina bifida.
- 19 Premature rupture of membranes.
- 20 Mother moribund on admission.
- 21 A.P.H. and pre-eclamptic.
- 22 A.P.H.
- 23 Forceps applied unsuccessfully outside. Version attempted.

NOTIFICATION OF BIRTHS ACT, 1907.

The following table shows the births notified under this Act :—

Births notified.								Live births.	Still births.	Total.
From institutions and by doctors	...	...	...	...	...	...	...	698	46	744
By midwives	...	...	...	...	...	...	...	599	20	619
By sundry persons	...	...	...	...	...	...	...	11	—	11
Total notified prior to registration								1308	66	1374

SUMMARY OF REGISTRARS' NOTIFICATIONS.

Births notified by registrars and							Live births.	Still births.	Total.
Attended by midwives	...	...	...	...	...	...	2	—	2
Born in institutions or attended by doctors...	...	...	...	...	...	...	28	6	34
Total	...	...	...	...	...	...	30	6	36

HOME VISITING.

Only one alteration occurred in the personnel of the staff during the year, Miss Slaney resigning in June in order to get married and Mrs. Headley being appointed to fill the vacancy.

The system of visiting homes remains the same. Midwives' cases are visited during the first 10 days and again during the first month. Doctors' cases are visited after the third week as a rule.

The present staff is heavily overworked in the clinics and special sessions, and therefore the home visiting is not carried out as one would wish. The real value of health visitors is their power to visit and instruct mothers in their own homes. The fact that most of the mothers refer to our health visitors not as such, but as "clinic nurses" is indicative of the general feeling of the public concerning the health visitors' duties. Only by visiting the homes can some cases be reached, and it must be remembered that a large number of cases do not attend the child welfare centres. We aim to pass on to the education authority, children in as good condition as possible; probably the standard could be improved if more home visiting were possible.

If any further reduction in visiting time has to be made the term "health visitor" will mean so little that "clinic nurse" would probably be the more accurate title. This should not be. The Senior Health Visitor has her own district to visit; she also has to superintend the organisation of her department, and her administrative work has been so much increased during the past two years that the question should now arise as to whether or no the administrative work should be undertaken by one person whole time.

The question of home visiting is, in these difficult times, one that should not be shelved: the work must be done as fully as possible. The standard of health may be considered to be fairly good for the present, but it should improve, and better home visiting can be a big help in this direction.

The usual special investigations into infantile deaths, stillbirths, pemphigus, and ophthalmia neonatorum are made and recorded and full records kept. Cases of pregnancy following stillbirths or miscarriages are advised to attend the antenatal clinic. The Medical Officer for Maternity and Child Welfare makes a personal enquiry into every case of puerperal pyrexia and puerperal fever notified, and records are kept.

The following table shows the work done under maternity and child welfare by the health visitors :—

[illegible]

CHILD WELFARE CENTRES.

On May 4th, 1932, a new child welfare clinic was opened at Thorpe Hesley, utilising rooms in the Council School which are used for a similar purpose by the Education Medical and Dental Officers. The same facilities are offered as are available at the two Rotherham centres. The attendance is not large, but certainly justifies the existence of the clinic ; the medical officer in attendance is the Assistant Tuberculosis Officer, Dr. Haughie.

The attendance at child welfare centres will be noted as increasing ; allowing for adverse weather conditions, the attendance is high and when, as occasionally does happen, over 90 people wish to see the doctor, the giving of advise is almost reduced to absurdity. Various methods have been tried whereby some control could be worked, but nothing satisfactory has so far been evolved. Assuming $2\frac{1}{2}$ hours for each session, 50 cases could be allowed 3 minutes each providing no hindrance arises ; this is a high figure and is in excess of what is allowed for efficient work. Actually the time of the session has been over four hours on occasion, and this is distinctly unfair to the people waiting for consultation as it means that they have to wait at least 2 hours, in all probability with a child who is not well.

One feels that were times better these figures would decrease and the family doctor would be consulted instead of the clinics—at any rate oftener than now occurs.

The following table gives the figures relating to the centres :—

					Ferham House.	Cranworth Road.	Thorpe Hesley *	Total.
Number of sessions held	...	...	...	...	99	100	17	216
New cases enrolled during the year :								
Under 1 year	...	...	...	...	443	501	24	968
Over 1 year	...	...	...	...	87	134	22	243
Cases brought forward from previous years and enrolled during the year :								
Under 1 year	...	...	...	...	236	233	7	476
Over 1 year	...	...	...	...	613	672	4	1289
Total number of children attending during the year :								
Under 1 year	...	...	...	...	679	734	31	1444
Over 1 year	...	...	...	...	700	806	26	1532
Total attendances made :								
Under 1 year	...	...	...	...	5047	5566	147	10760
Over 1 year	...	...	...	...	3787	5345	130	9262
Average attendance per session	...	...	...	...	90	109	16	—
Average number of medical consultations per session					50	55	15	—

* From May 4th, 1932.

The total number of children registered at the child welfare centres at the end of the year was 4,646, comprising 796 under 1 year and 3,850 from 1 to 5 years of age. As the estimated pre-school population of Rotherham is 6,000 the above figure indicates that 77 per cent. of the total pre-school population have been enrolled at the centres.

The following table shows the increased attendances during recent years :—

Year.	Sessions held.	Infants attending		Total attendances
		Under 1 year.	1—5 years	
1925	148	815	473	5,759
1926	150	2,186	2,351	9,580
1927	150	1,109	866	7,741
1928	173	1,159	1,062	11,438
1929	196	1,350	1,101	13,116
1930	200	1,359	1,246	16,295
1931	200	1,376	1,404	18,458
1932	216	1,444	1,532	20,022

During the year, £8 was raised as a result of two jumble sales held at the centres, and this was distributed in prizes for a mothercraft competition during December.

VOLUNTARY HELP.

During 1932 the voluntary helpers have continued their visits to the child welfare centres.

Twenty-five ladies attended in rotation on the four days weekly when clinics were held, to serve tea to the mothers and to help in other ways. Help has also been given in knitting babies' garments, etc.

ULTRA VIOLET LIGHT CLINIC.

The ultra violet light clinic is continued on the same lines as before. The results are encouraging, but one feels that more could be done if time and apparatus were available. At present one must be satisfied with a narrower outlook.

The following table gives particulars for the year :—

Number of sessions held	...	...	...	...	...	144
New cases :						
Under 1 year	...	...	...	...	...	14
Over 1 year	...	...	...	...	...	85
Total attendances :						
Under 1 year	...	...	...	...	...	176
Over 1 year	...	...	...	...	...	3452
Average attendance per session	...	...	...	...	...	25

MINOR TREATMENT CENTRES.

The minor treatment cases are seen at each centre every morning as required, and dressings and treatment are given by a health visitor under instructions from the medical officer. This is a further unfair use of health visitors' time ; the minor treatment should be undertaken by the Hospital, at the out-patients' department at Alma Road Hospital, by the nurses of the Education Authority or by some other means to be devised.

Minor treatment is a department which is increasing and some co-operative scheme is urgently needed. The present situation is that if we do not provide treatment no one else will, and the unfortunate patient is left to make the best of it.

Of the 269 children referred to the centres for treatment, 253 actually attended and 1,314 separate treatments were given. The following list shows the defects treated :—

Septic umbilicus	...	...	...	...	...	...	24
Impetigo	...	...	...	...	...	...	33
Eczema	...	...	...	...	...	...	9
Discharging eyes	...	...	...	...	...	...	47
Discharging ears	...	...	...	...	...	...	69
Septic conditions	...	...	...	...	...	...	49
Ringworm	...	...	...	...	...	...	4
Abscesses and boils	...	...	...	...	...	...	11
Burns	...	...	...	...	...	...	8
Circumcision	...	...	...	...	...	...	4

FREE AND ASSISTED MILK SCHEME.

The working of the free and assisted milk scheme continues in the same way : any case over 18 months is only granted milk on a special order by the medical officer.

The local economic conditions have not improved and it has been necessary to supply more free milk than before. A special grant was made to cover this increase. At present the situation shows no sign of improvement and it is anticipated that the cost of this scheme will show no reduction as yet. A comparative table is included showing the yearly increase in cost since the scheme was started in 1925.

The following table gives a statement of the working of the scheme during the year :—

					Cows milk.	Dried milk.
Number of applications received	...	...	...	...	3282	3550
Number granted free	...	...	...	...	3011	3230
Number granted half cost	...	...	...	...	109	158
Number disallowed	...	...	...	...	162	162
Approximate quantity	...	...	...	...	10,667 gallons	18,278 packets
Approximate cost	...	...	...	...	£822 10 0	£1,371 14 0

Applications are renewed monthly.

Included in the above table is the amount of milk shown hereunder granted during the year under the transferred service from the Public Assistance Committee to the Maternity and Child Welfare Sub-Committee, in pursuance of the Local Government Act, 1929.

					Cows milk.	Dried milk.
Number of applications received	...	...	...	...	489	431
Number granted free	...	...	...	...	472	422
Number granted half cost	...	...	...	...	12	8
Number disallowed	...	...	...	...	5	1
Approximate quantity	...	...	...	...	1,630 gallons	2,372 packets
Approximate cost	...	...	...	...	£126	£180

Number of expectant mothers granted assistance	...	...	...	...	379
Number of grants made	...	...	...	...	747
Number of infants granted assistance	...	...	...	...	1078
Number of grants made	...	...	...	...	5761

Approximately 30% of the expectant mothers and 50% of all infants under 18 months of age received milk assistance during the year.

The gradually increasing cost of the free and assisted milk scheme is shown by the following table :—

Year.	No. of applications.	Grants made.	Quantity.		Approximate cost.
			Cows milk	Dried milk	
			gallons	lbs.	£
1925	1779	1633	4718	1492	648
1926	3866	3469	8226	5999	1310
1927	1722	1521	3650	2919	537
1928	3901	3612	6884	8737	1254
1929	3606	3314	5852	9983	1286
1930	4463	4110	7845	10557	1465
1931	5696	5311	10620	12505	1832
1932	6832	6508	10667	18278	2194

COD LIVER OIL.

During the year a change was made in the free issue of cod liver oil preparations. Previously all necessitous cases have had free issue of cod liver oil emulsion, cod liver oil and malt, or Roboliene ; this scheme was rapidly becoming a bigger burden than results warranted. It is our opinion that many cases instead of benefiting were actually suffering from the administration of excess of cod liver oil. In view of this an experiment was made with a number of cases, giving very small doses of pure cod liver oil supplemented in some cases with syr. ferri phos. co. (Parrish's Food). The results obtained were striking, particularly when costs were compared. It was found that infants showed a distinct improvement on the new system as compared with the old.

As a result of this it was decided to stop issuing the cod liver oil preparations free to all and to issue pure cod liver oil and Parrish's Food instead. This is still being done and results in the condition of the children point to success. The chief

points are that, medically, the dose is under much better control, and financially, the cost is only fractional compared with the old scheme. It is proposed to carry on with this method at present ; particularly as more cases are needing this form of assistance. The old preparations are still available for those who wish to buy them.

MUNICIPAL DEPOTS FOR THE SALE OF DRIED MILK, &c.

During the year, at the two depots, 17,787 packets of dried milk products were sold, 733 being at half-cost ; and 17,536 were distributed free. The total sales of malt and cod liver oil products were 4594 $\frac{3}{4}$ lbs. malt and oil, 154 gallons 20 ozs. cod liver oil emulsion and 10 gallons 59 ozs. of pure cod liver oil. In addition 47 gallons 102 ozs. of Parrish's Food were sold. 194 gallons 12 ozs. of cod liver oil emulsion, 13 gallons 6 ozs. pure cod liver oil, 1,558 lbs. malt and oil and 1 gallon 152 ozs. of Parrish's Food were also granted free.

CONVALESCENT HOME.

The two beds rented at the Yorkshire Home for Mothers and Babies were used continuously throughout the summer months.

Applications were governed by the following scale :—

Free in cases where income after deducting rent was 10/- or less per head, counting 2 as 3, 3 as 4, etc.

Above 10/- per head a sum of not more than 10/- per week is chargeable.

Many expressions of appreciation have been received from mothers who had the opportunity of staying at the home.

It has been found that the mothers benefit more by the change than do the infants.

HOME HELPS.

There was an increase in the demand for home helps during the year and 59 homes were attended with 1,247 days on which the home helps were employed. This is the largest demand made in any one year since the inception of the scheme in 1925.

The extent of the scheme since its inauguration is summarised below :—

Year.	Number of homes attended.	Number of days on which home helps were employed.
1925 	17	244
1926 	18	275
1927 	52	938
1928 	50	956
1929 	47	763
1930 	47	946
1931 	49	958
1932 	59	1247

MATERNITY OUTFITS.

The maternity outfits supplied by the Stoddart Bequest in 1927 have been augmented by the purchase of two further outfits.

Each bag contains all the necessary clothing and dressings etc., for the confinement, and the bags are completely sterilised before issue.

There has been a constant demand for the service during the year.

ORTHOPAEDIC SCHEME.

Number of clinics held	...	...	...	...	...	11
„ cases examined	...	...	...	...	...	20
„ examinations made	...	...	...	...	...	40
„ splints, etc., supplied	...	...	...	...	...	6
„ children who received indoor treatment	...	...	...	...	...	1
„ children who received massage	...	...	...	...	...	2

No children were receiving indoor treatment at Kirbymoorside at the end of the year, but one was awaiting admission when old enough for treatment.

SCHOOL ENTRANTS.

As in previous years, particulars of pre-school health and progress of infants have been submitted to the School Medical Officer.

CERTAIN DISEASES.

PUERPERAL FEVER :

Cases notified	...	...	...	...	...	...	6
Removed to Norton Hall	...	...	...	...	...	...	3
Deaths	...	...	...	...	...	...	1

One case had been previously notified as puerperal pyrexia.

PUERPERAL PYREXIA :

Cases notified	...	...	...	...	...	...	10
Treated at Ferham House	...	...	...	...	...	...	2
Treated at Alma Road Hospital	...	...	...	...	...	...	1
Treated at Jessop Hospital	...	...	...	...	...	...	1
Treated at home	...	...	...	...	...	...	4
Removed to Norton Hall	...	...	...	...	...	...	4
Deaths	...	...	...	...	...	...	2

OPHTHALMIA NEONATORUM :

Cases notified	...	...	...	...	...	...	6
Nursed at home	...	...	...	...	...	...	2
Nursed by health visitors	...	...	...	...	...	...	4
Recovered	...	...	...	...	...	...	5
Vision impaired	...	...	...	...	...	...	—
Deaths	...	...	...	...	...	...	1

PEMPHIGUS NEONATORUM :

The one case notified was treated at home and made good recovery.

WHOOPING COUGH :

Reliable statistics concerning this disease are unobtainable as it is not notifiable. During the year 6 deaths were certified giving this disease as the cause.

GENERAL.

DENTAL SCHEME.

The number of attendances (260) made by children referred from the child welfare centres to the School Dentist is more than in 1931 and these are generally only the urgent cases. Although the teeth extracted (518) were all abscessed it is sad to think how irregular (and so prone to decay) will be their second teeth. It is interesting to conjecture how much more good the school dental scheme would be if there were some routine dental treatment for children under five years of age. This, together with advice to mothers as to diet, would benefit the teeth of school-entrants enormously.

REMOVAL OF CHILDREN.

Notices of removal of 167 children were sent to other authorities, and 30 notices of incoming children were received.

SEWING CLASS.

One class is held weekly on Tuesdays from 2.30 to 5.0 p.m. Twelve mothers have attended regularly and 48 garments have been made during the year.

INFANT FEEDING.

The ability to breastfeed appears to be decreasing. Doubtless there are many factors governing this, not least of which is the lack of desire to breastfeed on the part of the mother. Of the 796 infants born in 1932 and attending the child welfare centres, only 368 were completely breastfed.

INFANTILE MORTALITY.

The following table gives the details concerning infantile mortality :—

CAUSE OF DEATH.				Under 1 week.	1—2 weeks.	2—3 weeks.	3—4 weeks.	Total under 4 weeks.	4 weeks and under 3 months.	3 months and under 6 months.	6 months and under 9 months.	9 months and under 12 months.	Total deaths under one year.
All Causes :													
certified	...	...	...	31	3	7	4	45	12	10	7	13	87
uncertified	...	...	...	2	—	—	—	2	—	—	—	—	2
Small-pox	...	...	...	—	—	—	—	—	—	—	—	—	—
Chicken-pox	...	...	...	—	—	—	—	—	—	—	—	—	—
Measles	...	...	...	—	—	—	—	—	—	—	—	2	2
Scarlet fever	...	...	...	—	—	—	—	—	—	—	—	—	—
Whooping cough	...	...	...	—	—	—	—	—	1	1	—	1	3
Diphtheria and croup	...	...	...	—	—	—	—	—	—	—	—	1	1
Erysipelas	...	...	...	—	—	—	—	—	—	—	—	—	—
Tuberculous meningitis	...	...	...	—	—	—	—	—	—	—	—	—	—
Pulmonary tuberculosis	...	...	...	—	—	—	—	—	—	—	—	—	—
Other tuberculous diseases	...	...	...	—	—	—	—	—	—	—	—	—	—
Meningitis (not tuberculous)	...	...	...	—	—	—	—	—	—	1	1	—	2
Convulsions	...	...	...	1	—	—	—	1	1	—	—	—	2
Laryngitis	...	...	...	—	—	—	—	—	—	—	—	—	—
Bronchitis	...	...	...	—	—	1	—	1	1	—	1	—	3
Pneumonia (all forms)	...	...	...	1	1	1	1	4	3	4	4	5	20
Diarrhœa	...	...	...	—	—	—	—	—	—	—	—	—	—
Enteritis	...	...	...	—	1	—	—	1	1	1	—	1	4
Gastritis	...	...	...	—	—	—	—	—	1	—	—	—	1
Syphilis	...	...	...	—	—	—	—	—	—	—	—	—	—
Rickets	...	...	...	—	—	—	—	—	—	—	—	—	—
Suffocation, overlying	...	...	...	—	—	—	1	1	—	—	—	—	1
Injury at birth	...	...	...	2	—	—	—	2	—	—	—	—	2
Atelectasis	...	...	...	2	1	—	—	3	—	—	—	—	3
Congenital malformations	...	...	...	2	—	—	—	2	—	—	—	—	2
Premature birth	...	...	...	23	—	4	—	27	1	—	—	—	28
Atrophy, debility & marasmus	...	...	...	2	—	1	—	3	1	1	—	1	6
Other causes	...	...	...	—	—	—	2	2	2	2	1	2	9
Totals	...	...	...	33	3	7	4	47	12	10	7	13	89

Nett births in the year : legitimate infants ... 1211
 illegitimate infants ... 54

Nett deaths in the year : legitimate ... 85
 illegitimate ... 4

Infantile mortality rate per 1,000 births : legitimate ... 70
 illegitimate ... 74

BOARDED-OUT CHILDREN.

Seven children have been under inspection during the year and 69 visits have been paid.

One infant was removed from overcrowded premises by order of a magistrate.

The following table relates to the administration of Part I. of the Children Act, 1908, for the year 1932 :—

I. Notification :—

(i) Number of persons receiving children for reward on the register at the end of the year	7
(ii) Number of children on the register :—	
(a) at the end of the year	7
(b) who died during the year... ..	—
(c) on whom inquests were held during the year	—

II. Visiting :—

(i) Number of infant protection visitors holding appointments under Section 2 (2) at the end of the year :—	
(a) Health visitors	1
(b) Female, other than health visitors	—
(c) Male	2
(ii) Number of persons (in addition to or in lieu of visitors under (i) above) or societies authorised to visit under the proviso of Section 2 (2),	5 health visitors

III. Proceedings taken during the year :—

No. of cases.	Section of Act under which taken.
—	—

IV. Number of cases in which the Local Authority has given a sanction during the year :—

(i) Under (a) of Section 3	—
(ii) Under (b) of Section 3	—
(iii) Under (c) of Section 3	—
Total	—

V. Number of orders obtained during the year :—

	From a justice.	From the Local Authority.
(i) Under (a) of Section 5 (1)	—	—
(ii) Under (b) of Section 5 (1)	—	—
(iii) Under (c) of Section 5 (1)	—	—
Totals	—	—

The following is a general summary regarding maternity and child welfare :—

1. POPULATION OF THE AREA SERVED BY THE COUNCIL—70,130.
2. NUMBER OF BIRTHS NOTIFIED IN THAT AREA DURING THE YEAR UNDER THE NOTIFICATION OF BIRTHS ACT, 1907 :—
 - (a) Live births, 1308. (b) Still births, 66. (c) Total 1374.
 - (d) By midwives, 619. (e) By doctors and parents, 755.
3. HEALTH VISITING.
 - (i) Number of officers employed for health visiting at the end of the year :
 - (a) by the Council, 6.
 - (b) by voluntary associations, None.
 - (ii) If any of the health visitors are engaged on other work during part of their time, state the equivalent of whole-time services devoted by the whole staff to health visiting—
 - (a) in the case of health visitors employed by the Council, 4 5/6.
 - (b) in the case of health visitors employed by voluntary associations, None.
 - (iii) Number of visits paid during the year by all health visitors :

(a) To expectant mothers	... ..	First visits	... ..	466
		Total visits	... ..	949
(b) To children under 1 year of age	... ..	First visits	... ..	1138
		Total visits	... ..	5669
(c) To children between the ages of 1 and 5 years	... ..	Total visits	... ..	11914
4. INFANT WELFARE CENTRES.
 - (a) Number of centres provided and maintained by the Council, 3.
 - (b) Number of centres provided and maintained by voluntary associations, None.
 - (c) Total number of attendances at all centres during the year :
 - (i) By children under 1 year of age, 10760.
 - (ii) By children between the ages of 1 and 5 years, 9262.
 - (d) Total number of children who attended at the centres for the first time during the year :
 - (i) Children under 1 year of age, 968.
 - (ii) Children between the ages of 1 and 5 years, 243.
 - (e) Total number of children who were in attendance at the centres at the end of the year :
 - (i) Children under 1 year of age 796.
 - (ii) Children between the ages of 1 and 5 years, 3850.
 - (f) Percentage of total notified births represented by the number in (d) (i), 74.
5. ANTE NATAL CLINICS (WHETHER HELD AT INFANT WELFARE CENTRES OR AT OTHER PREMISES).
 - (a) Number of clinics, including ante-natal clinics, provided at institutions transferred to the Council under Part I of the Local Government Act, 1929, provided and maintained by the Council, 3.
 - (b) Number of clinics provided and maintained by voluntary associations, 0.
 - (c) Total number of attendances by expectant mothers at all clinics during the year, 2292
 - (d) Total number of expectant mothers who attended at the clinics during the year, 659.
 - (e) Percentage of total notified births represented by the number in (d), 48.

6. MATERNITY HOMES AND HOSPITALS.

I.

	Separate maternity institutions provided by the Council.	Institutions (with maternity wards) transferred to the Council under Part I of the Local Government Act, 1929.	Institutions provided by voluntary associations.
Number of institutions ...	1	1	—
Number of maternity beds	10	13	—
Total number of women admitted to these beds during the year ...	222	195	—

II.

Number of women (if any) sent by the Council during the year to other maternity institutions,
 7. Transferred to Norton Hall, Sheffield, for puerperal pyrexia, and fever—institutional cases, 5 ; district cases, 2.

7. HOMES AND HOSPITALS FOR SICK OR AILING CHILDREN UNDER 5 YEARS OF AGE.

I.

	Separate institutions provided by the Council for these cases.	Institutions (with accommodation for these cases) transferred to the Council under Part I of the Local Government Act, 1929.	Institutions provided by voluntary association.
Number of institutions ...	—	1	—
Number of beds provided for such children	—	36	—
Total number of children admitted to these beds during the year	—	204	—

II.

Number of such children (if any) sent by the Council during the year to other institutions, 0.

8. CONVALESCENT HOMES.

(a) Number of convalescent institutions with accommodation for expectant or nursing mothers or children under 5 years of age :

(i) provided by the Council, None.

(ii) provided by voluntary associations. The Rotherham Corporation have equipped two beds at the Yorkshire Home for Mothers and Babies, Withernsea.

(b) Number of beds for such cases in convalescent institutions :

(i) provided by the Council, 2.

(ii) provided by voluntary associations, None.

(c) Total number of cases admitted to the beds included in (b) during the year, 26.

(d) Total number of such cases sent by the Council during the year to other convalescent institutions, None.

9 HOMES FOR MOTHERS AND BABIES

(a) Number of such homes :

(i) provided by the Council, None.

(ii) provided by voluntary associations, None.

(b) Number of beds in homes :

(i) provided by the Council, None.

(ii) provided by voluntary associations, None.

(c) Total number of cases admitted to these homes during the year :

(i) expectant mothers, None.

(ii) mothers and babies, None.

(iii) babies, None.

(d) Total number of such cases sent by the Council during the year to other homes for mothers and babies, None.

10. DAY NURSERIES.

(a) Number of day nurseries :

(i) provided by the Council, None.

(ii) provided by voluntary associations, None.

(b) Number of places for children under 5 years of age in the nurseries :

(i) provided by the Council, None.

(ii) provided by voluntary associations, None.

(c) Total number of attendances of children at these nurseries during the year, None.

11. INFECTIOUS DISEASES.

Disease.	Number of cases notified during the year.	Number of cases visited by officers of the Council.	Number of cases for whom home nursing was provided by the Council.	Number of cases removed to hospitals.
(1) Ophthalmia neonatorum	6	6	4	—
(2) Pemphigus neonatorum	1	1	—	—
(3) Puerperal fever	6	Professional enquiry into all cases by M.O., M.C.W.	—	3
(4) Puerperal pyrexia	10	do.	—	4
(5) Measles and German measles (in children under 5 years of age)	862	767	—	3
(6) Whooping cough (do.)	Not notifiable	56	—	—
(7) Epidemic diarrhoea (do.)	do.	3	—	—
(8) Poliomyelitis (do.)	do.	—	—	—

12. HOME NURSING.

(a) Number of nurses employed at the end of the year for the nursing of expectant mothers and children under 5 years of age, maternity nursing, or the nursing of puerperal fever :

(i) by the Council, None.

(ii) by voluntary associations, 8 (General Nursing).

(b) Total number of cases attended during the year by these nurses, 106.

13. MIDWIVES.

- I. (a) Number practising in the area served by the Council for maternity and child welfare at the end of the year, 21.
 - (b) Number
 - (i) employed by the Council, None.
 - (ii) subsidised by the Council, None.
 - (iii) employed by voluntary associations, 1.
 - (c) Number of cases during the year in which the Council paid or contributed to the fee of a midwife, None.
- II. (a) Number of cases attended by midwives during the year :
 - (i) as midwives, 617.
 - (ii) as maternity nurses, 100.
 - (b) Number of cases during the year in which medical aid was summoned by a midwife under Section 14 (1) of the Midwives Act, 1918, 223.

14. MATERNAL DEATHS.

- (a) Number of women who died in, or in consequence of, childbirth in the area served by the Council for maternity and child welfare during the year :
 - (i) from sepsis, 6.
 - (ii) from other causes, 1.
- (b) Number of these cases which died :
 - (i) at home, —
 - (ii) in institutions, 7.

SECTION X.

MENTAL DEFICIENCY.

In the following table particulars are given for the year 1932 of mental defectives (A) “subject to be dealt with” by the Local Authority, and (B) who may become “subject to be dealt with” by the Local Authority.

A.—Number of cases “subject to be dealt with” :—

						Males.	Females.	Total.	
1.	Under “ order ” :—								
	(a)	(1) In institutions (excluding cases on licence).							
		Under 16 years of age	...	...	...	3	2	5
		Aged 16 years and over	...	...	...	6	27	33
	(2)	On licence from institutions.							
		Under 16 years of age	...	...	...	1	—	1
		Aged 16 years and over	...	...	...	1	—	1
	(b)	(1) Under guardianship (excluding cases on licence).							
		Under 16 years of age	...	...	...	—	—	—
		Aged 16 years and over	...	...	...	2	3	5
	(2)	On licence from guardianship							
		Under 16 years of age	...	...	...	—	—	—
		Aged 16 years and over	...	...	...	—	—	—
2.	In “ places of safety.”								
		Under 16 years of age	...	...	...	2	—	2
		Aged 16 years and over	...	...	...	3	1	4
3.	Under statutory supervision		...	...	...	10	1	11
	Of whom,—								
	(a)	Awaiting removal to an institution				7	1	8	
4.	Action not yet taken under any one of the above headings :—								
	(a)	Notified by Local Education Authority (Sec. 2 (2))				1	1	2	
	(b)	Mental defectives in receipt of Poor Law relief :—							
	(1)	Institutional	(a)	In Public Assistance institutions not approved under Section 37			12	10	22
			(b)	In institutions certified under the M.D. Acts (including those approved under Section 37) —					
			(i)	Cases “ placed ” under Sect. 3			7	2	9
			(ii)	Other cases			—	—	—
	(2)	Domiciliary				7	14	21	
	(c)	Otherwise “ ascertained ”				1	—	1	

B.—Number of cases who may become “subject to be dealt with” :—

1.	In institutions or under guardianship—dealt with under Sec. 3 :—								
	(a) In regard to whom the Local Authority contributes under its permissive powers	...	...	...	...	...	—	—	—
	(b) Maintained wholly by parents, relatives or others	...	...				—	—	—
2.	Reported to the Local Authority from any reliable source but as to whom no action has been taken	...	...	...	...	23	31	54	
3.	Under voluntary supervision	...	...	...	...	12	6	18	

Also there were

						Males.	Females.	Total.
(a)	Number of instances in which licence was granted during 1932 :—							
	1.	From institutions	...	...	...	1	—	1
	2.	From guardianship	...	...	...	—	—	—
(b)	Number of instances in which cases on licence have been returned to institutions or transferred to guardianship during the year 1932 :—							
	1.	To institutions...	...	...	...	—	1	1
	2.	To guardianship	...	...	...	—	—	—

Of the cases notified by the Local Education Authority under Section 2 (2) during the year, there were :—

						Males.	Females.	Total.
Sent to institutions by “ order ”	...	...	...	...	...	1	—	1
Placed under guardianship by “ order ”	...	...	...	...	...	—	—	—
Placed under statutory supervision	...	...	...	...	...	—	—	—
Placed in “ places of safety ”	...	...	...	...	...	—	—	—
Died or removed from area	...	...	...	...	...	—	—	—
Action not yet taken	(a)	in receipt of Poor relief			...	—	—	—
	(b)	Others			...	1	1	2
Total						2	1	3

Of the total number of mental defectives known to the Local Authority, there were :—

(a) Number who have given birth to children during 1932 :—

(1)	After marriage	...	...	...	...	1
(2)	While unmarried	...	...	...	...	—

(b) Number who have married during year 1

At the end of the year the total number of defectives known to the Local Authority was 189. Of these, 45 were under “ order ” ; 38 being in institutions, 2 on license from institutions, and 5 under guardianship. There was no case under license from guardianship. Six cases were in “ places of safety,” and 52 were in receipt of Poor Law relief, comprising 31 institutional and 21 domiciliary cases. The other 86 were maintained at their own homes, 13 of whom were under statutory supervision.

During the year 16 cases were admitted to institutional care ; 1 was transferred from guardianship to an institution ; 1 was returned from license from an institution ; 1 was sent to an institution from license from guardianship ; 1 was placed on license from institution ; and 1 was placed under guardianship.

St. Catherine's Certified Institution, near Doncaster, is now a growing colony. Starting in October, 1931, when the first patients were admitted to the mansion with its accommodation for 20 patients, there are now two additional villas with accommodation for 120 patients, and a large bungalow used as a workroom.

Originally the mansion was used for female defectives, but these were transferred to the villas in March, 1932, leaving the mansion to be used exclusively for males. The present position is, therefore, that there is accommodation for 20 males in the mansion, and for 120 females in the two villas.

Extensions are now being proceeded with for two further pavilions of 60 beds each, and a low grade block of 40 beds, together with workshops and other necessary buildings.

The present allocation of beds for Rotherham is 20, 3 male and 17 female, and these are all filled. At the inception of the colony 3 females were admitted in 1931. During 1932, 17 cases were admitted comprising 3 males and 14 females. These were, from Alma Road Institution, 13; Beverley Institution, 1; Scattered Homes, Rotherham, 1; patients' own homes, 2. No deaths or discharges have taken place.

When the extensions are completed the quota of available beds for Rotherham will help materially to solve the difficulty of obtaining accommodation for male defectives experienced in recent years.

The 38 cases "under order" in item A1 (a) (1) were in the following certified institutions :—20 cases were in the St. Catherine's Certified Institution; 9 cases were in the Whittington Hall Certified Institution; 5 cases were in the Rampton State Institution; and 1 each in Calderstones, Eagle House, Stoke Park, and Prudhoe Hall.

The 9 cases "placed" under Section 3 in certified institutions and included in item A4 (b) (1) (b) were in the following institutions :—7 cases were in the Royal Albert Institution, and 1 case each in the David Lewis and the Stoke Park Colonies.

SECTION XI.

BLIND PERSONS.

The number of blind persons registered in the Borough at the 31st December, 1931, was 126. During the year 1932 the number of new cases registered was 16, and the deaths or removals 12. The number on the register at the end of the year was 130.

The following tables will be of interest :—

DISTRIBUTION.

Intra-institutional									
Sheffield Workshops :	Workers	...	...	...	...	...	...	...	8
	Trainees	...	...	...	...	...	...	...	2
Royal Blind School, Sheffield	...	...	...	...	...	...	...	...	3
Other residential institutions	...	...	...	...	...	...	...	...	3
Poor Law institutions	...	...	...	...	...	...	...	...	4
Mental hospitals	...	...	...	...	...	...	...	...	2
Extra-institutional	...	...	...	...	...	...	...	...	108
									130
									==

AGE AND SEX.

Age.								Males.	Females.	Total.
0—5	...	...	...	...	...	...	...	—	—	—
5—16	...	...	...	...	...	...	...	1	2	3
17—20	...	...	...	...	...	...	...	3	2	5
21—30	...	...	...	...	...	...	...	5	1	6
31—40	...	...	...	...	...	...	...	13	9	22
41—50	...	...	...	...	...	...	...	8	2	10
51—60	...	...	...	...	...	...	...	14	10	24
61—70	...	...	...	...	...	...	...	13	9	22
71 and over	...	...	...	...	...	...	...	22	16	38
								—	—	—
								79	51	130
								==	==	==

EMPLOYABILITY (over 16 years of age).

								Males.	Females.	Total.
Employed	...	...	...	...	...	...	...	9	5	14
Training	...	...	...	...	...	...	...	1	2	3
Trainable	...	...	...	...	...	...	...	6	—	6
Trained but unemployed	...	...	...	...	...	...	...	—	1	1
Unemployable	...	...	...	...	...	...	...	62	41	103
								—	—	—
								78	49	127
								==	==	==

EMPLOYMENT.

Factory :	Basket makers	...	...	...	...	...	...	3	
	Mat makers	...	...	...	...	...	...	2	
	Knitters	...	...	...	...	...	...	3	
								—	8
At home	...	...	...	...	...	...	...		6
									—
									14
									==

For the fifth year in succession there have been no blind children under the age of five years. The three children under 16 years of age on the register are resident at the Royal Blind School, Sheffield.

All blind persons in the Borough who are suitable for technical training are either receiving this, or are awaiting admission to the Workshops at Sheffield.

The yearly analysis of the register has been made, and the Blind Persons Act Committee are satisfied that all blind persons under the age of 50 who are suitable for education or technical training have been reported to the Education Committee, and that employment has been provided for all blind persons able to take advantage of it.

There are 89 blind persons of 50 years and over resident in the Borough. All blind persons at this age period are eligible for the Old Age pension on the same terms as sighted persons over 70 years of age. Of the 89, 79 are in receipt of the pension ; 2 are married, and their income is over the scale ; 1 has private means, and the income is over the scale ; and 7 are resident in institutions.

The co-operation between the Borough Council and the Sheffield City Council in matters relating to the welfare of the blind has been continued during the year.

The Rotherham Borough Council granted domiciliary assistance to the unemployed blind persons in the Borough amounting to £2,414 0s. 3d., being an increase of £619 6s. 10d., over the previous year.

The handicraft class has been continued during the year ; meetings have been held in each week, and have been organised on the same lines as last year. The attendances have again increased, as will be seen from the following table :—

1931—Rotherham blind persons	...	...	...	...	...	...	733
West Riding blind persons	...	...	...	...	...	...	291
							—
Total ...	...	...	...	...	...	...	1024
							==
1932—Rotherham blind persons	...	...	...	...	...	...	916
West Riding blind persons	...	...	...	...	...	...	236
							—
Total ...	...	...	...	...	...	...	1152
							==

In connection with the Braille class, there have been 158 attendances during the year, in addition to 30 lessons given in the homes.

The rambles for those attending the handicraft class have been continued, and were much appreciated.

The monthly concerts during the winter season have been arranged in co-operation with the Rotherham Toc H, to whom the committee wish to express their thanks. These concerts are much appreciated by the blind people, and the attendances have been very good.

The summer outing, tea and concert at Christmas, and Christmas gifts to the blind people, were again provided.

The Voluntary Fund Committee has continued its work during the year in close co-operation with the work under the Borough Council. The income received was £133 13s. 7d., and the expenditure £201 7s. 6d. Through this fund 35 free wireless sets have been provided and maintained ; and 33 crystal sets provided by the British " Wireless for the Blind " Fund have been made into one-valve sets, installed, and kept in working order. In addition, 3 sets for the " deaf-blind " have also been provided from this fund. Certificates have now been issued to 93 blind persons in the Borough entitling them to receive a free wireless licence in accordance with the provision of the Wireless Telegraphy (Blind Persons Facilities) Act, 1926.

The Broadcast programmes are of great interest to blind persons, and the free licence and provision of free sets are amongst the most appreciated benefits provided.

During the year tickets have been issued to blind persons in the Borough entitling them to free slipper baths at the Rotherham Corporation Public Baths.

Grants for clothing and for the provision of spectacles have been given in several cases by the Voluntary Fund Committee.

The work of teaching and visiting in the Borough has again been carried out by Miss N. Brookes under the terms of the agreement between the Sheffield Corporation and the Rotherham Borough Council. During the year she has paid the following visits :—

Routine.	Special.	Assistance.	Total.
111	141	262	514

During the year, 7,860 twopenny and 1,400 one penny tram tickets were provided free of charge to the blind persons living within the Borough, the cost being borne in equal proportions by the Tramways Committee and the Blind Persons Act Committee.

Through the kindness of the Managements of the Hippodrome, Empire, Cinema, Whitehall, and Tivoli Picture Houses, blind persons living in the Borough are allowed free passes to attend performances at each of these places free of charge.

